

STATUS REPORT

MAVAW'S Responses to Domestic Violence in Trinidad
and Tobago at the Micro, Mezzo and Macro Level.

Prepared By

Dr. Russell Foote, Chairman and Donald Berment, Secretary.



**Submitted to the
Joint Select Committee on Human Rights,
Diversity, the Environment and Sustainable
Development—Tuesday May 12th 2015.**

Men Against Violence Against Women.

Yours In Nation Building.

REGISTERED NON-PROFIT COMPANY—NO M 1799 (95). (Charitable Status F (BUD): 7/4/205)

JOINT SELECT COMMITTEE INFORMATION.

10th Republican Parliament: 5th Session (4th Aug 2014—17th June 2015)

Committee on Human Rights, Diversity, the Environment and Sustainable Development

Committee Type: Joint Committee Business

Date Appointed: 7 Nov 2014

Secretary: Candice Skerrette

Email: jschumanrights@ttparliament.org

TERMS OF REFERENCE

House of Representatives Standing Order 106 states:

"The Committee on Human Rights, Diversity, the Environment and Sustainable Development shall have the duty of considering from time to time, and reporting whenever necessary, on all matters related to?

- The compatibility of Acts of Parliament with human rights, and any matters relating to human rights in Trinidad and Tobago (but excluding consideration of individual cases);
- The creation of an inclusive and more equitable society through greater social justice and sustainable human development within Trinidad and Tobago; and
- The environment, climate change, energy efficiency, sustainability, and planning the use, sustainable development and protection of land and other resources."

COMMITTEE MEMBERS

Dr. Bhoendradatt Tewarie	COP	9 Dec 2014 - Present
Rev. Joy Abdul-Mohan (Chairman)	Independent	9 Dec 2014 - Present
Mr. Nizam Baksh	UNC	7 Nov 2014 - Present
Ms. Ramona Ramdial	UNC	7 Nov 2014 - Present
Mr. Rodger Samuel	COP	7 Nov 2014 - Present
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Mr. Ganga Singh	COP	9 Dec 2014 - Present
Mrs. Camille Robinson-Regis	PNM	9 Dec 2014 - Present
Mr. Garvin Nicholas	UNC	3 Mar 2015 - Present

Former Members

Mr. Anand Ramlogan, SC	UNC	9 Dec 2014 - 2 Feb 2015
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Dr. Russell Foote, *CHAIRMAN*. Donald Berment, *SECRETARY*. Desmond Persad, *TREASURER*.



EXECUTIVE SUMMARY.

On behalf of **Men Against Violence Against Women (MAVAW)**, we the undersigned, would firstly like to thank the Government of the Republic of Trinidad and Tobago and the Joint Select Committee on Human Rights, Diversity, the Environment and Sustainable Development for giving us this opportunity to contribute to the resolution of this burning issue, **Domestic Violence** at the Micro Level, **Gender Based Violence** at the Mezzo Level and **Human Rights, Diversity, the Environment and Sustainable Development** at the Macro Level.

At the **Micro Level**, Domestic Violence has been and continues to make family life stressful and dysfunctional for children, teenagers, and adults in the affected families at the Primary Level of the Ripple Effect Theory (RET), eventually affecting neighbouring communities, the Secondary Level of (RET) and finally affecting the National Community and Government at the Tertiary Level of (RET). This theory is submitted on the CD attached, along with the other references in the Report.

At the **Mezzo Level**, Gender Based Violence, a front burner in the development stage by academics and elsewhere, mainly Civil Society, expands Violence to women, men and children, by paying attention to the manner in which Violence is perpetrated by Institutions, Policies, Rules, Procedures and Practices, Acts of Parliament and other instruments designed for the development of societies. The affect is then experienced in the physical, emotional and spiritual domains.

A critical and consistent analysis at the **Macro Level**, Human Rights, Diversity, the Environment and Sustainable Development is the way forward and holds the key to the eventual reduction and elimination of Violence in Society.

Enclosed within, is a comprehensive organizational counselling, support and research profile (CSR) of **Men Against Violence Against Women (MAVAW)**, a non-governmental organization, with Charitable Body Status, which has been working with people as individuals and in communities, across Trinidad and Tobago since 1994, registering as a non-profit company in 1998 and today, up to date with its Annual Returns and Income Tax Statements.

To this end, the document/status report highlights the service oriented philosophy of **MAVAW**, its innovative sustainable structure, the organizational objectives, various outreach strategies and efforts and the major contributions of 2 Directors, Dr. Foote and Donald Berment and 1 Formal Management member, Dr. Robert Lee Moultrie. The list of work done by members like David Law, Johnny Bharath, the 2 other first members of **MAVAW**; Dr. George Gowrie and Dr. Lennox Grant, is long and will be referenced on the CD with the Report, where possible.

MAVAW's contribution to child, adolescent and family empowerment, is positioned within a **Community Development Framework**, in both an operational and development fashion. The Organizational Structure of **MAVAW** is crafted to allow participation at 3 Levels, **High Profile, Formal and Activist**, which facilitates faster decision making and a consultative approach, alongside real opportunity for its sustainable development.

MAVAW's outreach responses to groups and communities have been stymied by an inability to offer on its own violation, workshops, programs and interventions, as a result of inadequate finances. However, individual members, have been self financing numerous outreaches on their own and together with other members.

In addition, through intense commitment, sheer will, intellectual, social and emotional capital, our members have been and continue to reach the parties in dysfunctional relationships, in different parts of Trinidad and Tobago and to Magistrate Courts, requesting reports on Domestic Violence matters, before them.

MAVAW is a man's organization, but has women as friends and consultants. Over the years, we have identified Acts of Parliament which need closer attention to fully encompass Human Rights, Diversity, the Environment and Sustainable Development.

Said Acts have been noted and the concerns expressed in the following pages and added as references on the CD.

RECOMMENDATIONS.

The reduction and eventual elimination of **Domestic Violence**, requires development of all sectors of the economy, in a manner that redounds to the benefit of individuals, groups, organizations and communities.

This is a critical requirement in order to provide support for households/families to reduce the impact of other factors, on the propensity to be violent and for building the **self-esteem** of all under purview, so that we will all be literate enough, to be our brothers and sisters keepers.

As a result, MAVAW proposes the following:

1. The adoption of an understanding of **Development** that prioritizes competency building of individuals, groups, organizations and communities in various spheres like, cultural, educational, environmental, technological, sports, agriculture, business and technical-vocational. (Dr. Foote).
2. Revitalization and rebuilding of communities, using institutional and implementation frameworks that are driven by the **ideas of people** living in such areas. This will bring greater participation of teenagers, adults and households in such communities. (Dr. Foote).
3. Return fully to **Community Policing**, which provides a great opportunity for Police Officers to build healthy relationships between households and their members.
4. Alignments between development of Child Care, Youth, Ageing and Family Development Policies, introducing an **Infant to Toddler Partnership Programme (ITTPP)** like the Geriatric Adolescent Partnership Programme (GAPP).
5. Putting **Community Building Efforts** at the **Centre** of the **National Development Agenda**, bearing in mind that communities are made up of households and the realization that **development** at this level would provide a more solid platform for **literacy building and violence reduction**.

6. Introduction of a **Family Research and Development Centre** as an independent and autonomous body staffed by a Director and eight researchers and guided by best practice policies.
7. Introduction of a **Nationwide Male Empowerment Program**, offering Workshops and Training, nurturing Family Days on a Quarterly Basis.
8. Appointment of a **National Family Council/Board**, with responsibility for developing a **National Family Policy**, research and data driven interventions and development programs, targeting all family types in Trinidad and Tobago.

Respectfully Submitted,

Signed  Dr. Russell Foote, Chairman.


Signed Donald Berment, Secretary/Counsellor.

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

INTRODUCTION

In the Subtitle to this Report the **Composition and Terms of Reference** of the **Joint Select Committee on Human Rights, Diversity, the Environment and Sustainable Development** was recorded for ease of reference. **MAVAW's** **Terms of Rererence** is derived from this Committee's **FIRST INQUIRY**, quoted immediately below.

- i) Describe the various programmes and services offered by you organization. Are there any services for families and children? Are there any services available for men?
- ii) What are the major challenges facing your programmes and services related to domestic violence?
- iii) What are the major achievements of your programmes and services related to domestic violence?
- iv) Are the staff of your organisation adequately trained to handle domestic violence cases?
- v) Is there an adequate level of security available at your organisation?
- vi) Does your organisation possess a confidentiality policy to safeguard victims of domestic violence?
- vii) Does your organisation provide outreach services/follow up services in communities?
- viii) Has anything been done to encourage male victims of domestic violence to come forward?
- ix) Has anything been done to change the stigma that only women are victims of domestic violence?
- x) Could you describe/outline the process for treating with a domestic violence case?
- xi) What has been your organization's experience on the impact of domestic violence on the family and children?

- xii) Do stakeholders meet on a regular basis to discuss programmes and services regarding domestic violence?
- xiii) Do the stakeholders share information and collaborate on plans and actions and programmes in order to ensure no duplicity and waste of resources?
- xiv) What is required to improve the level of support for victims of domestic violence?
- xv) What are the sources of income that provide support for the operationalization of your services/programmes?

The above mentioned **15 Focus areas** will be expanded in the **Body** of the document, where not identified elsewhere in the **Report**. Most importantly, **MAVAW** having been actively involved with and fully participating in the **Violence Reduction Movement** since 1994, a period of **21 years and 5 months** to date, providing experienced **counselling, support and developmental research**, free in most instances; our submission is comprehensive and involves a discussion on the 3 Levels of **Sustainable Development**, the **Micro Level**, the **Mezzo Level** and the **Macro Level**, already mentioned in our **Executive Summary** and fuelled by our first outreach presentation in 1994, **The Ripple Effect Theory**, giving full appreciation and value to the fact that everything impacting in/on the **Family Environment**, negative or positive, eventually **ripples** into the **Immediate Community** and finally into the **National Community**.

Sustainable development is a process for meeting human development goals while sustaining the ability of natural systems to continue to provide the natural resources and ecosystem services upon which the economy and society depend. While the modern concept of sustainable development is derived most strongly from the 1987 Brundtland Report, it is rooted in earlier ideas about sustainable forest management and twentieth century environmental concerns.

Sustainable development is the organizing principle for sustaining finite resources necessary to provide for the needs of future generations of life on the planet. It is a process that envisions a desirable future state for human societies in which living conditions and resource-use continue to meet human needs without undermining the "integrity, stability and beauty" of natural biotic systems. (Wikipedia)

To fully understand **Violence In Society**, especially **Violence Against Women**, it has to be placed in a holistic context, which encompasses the **Physical, Psychological and Spiritual** aspects of our existence as human beings, in this God created space and the lifestyles of men and women, individually and in relationships, with themselves, with others, both significant and casual and the environment.

God's **Primary** gifts to us, as children of God, every single son and daughter, born to humankind, can be listed as the **3 P's Opportunities**:-

- **Procreation**
- **Protection**
- **Provision**, in any order, being involved in any one or more than one, each to his/her own choice and level of personality development.

The most poignant and long lasting example of the **resistance** to this violence, has been seen by the life and death of Jesus Christ, the first man over 2,000 years ago, who chose to believe in his spiritual and physical connection to God as a Parent, prepared for and died a painful death, thereby saving his earthly mother, Mary, from an even more painful death, as an adulterous, promiscuous woman of that time, which was a public stoning, until death.

In addition to this example of **resistance**, we also recorded the first **3-Point Separation**, of the type of abuse, which occurs in all instances, i.e.

- **Direct Abuse** (to the individual)
- **Indirect Abuse** (to their loved ones)
- **Spiritual Abuse** (disrespect for spiritual belief to all others).

The **First Limitation** we have to contend with, in understanding **Violence In Society**, is the fact that, **Violence is acceptable** in 2 situations, i.e.

- In **Combat Mode** (war)
- In **Self Defence Mode**, but only when the **4** following conditions exist, i.e.
 - The threat to you is **immediate**.
 - You must be in genuine **fear** of an attack.
 - You **cannot escape** from the threat.
 - The **force** you use to defend yourself must be **reasonable**.

To further contextualize **Violence In Society** and its consequent **resistance** to and/or **Movement For Change**, which can be viewed in 3 Phases, i.e.

- **Phase One—The First Movement**, which was mainly social in nature, radical in action and focusing only on **Direct Violence** to women, being perpetrated only by men, very Gender Biased in practice.
- **Phase Two—The Second Movement**, introduced **Domestic Violence Legislation** and was therefore social and legal in nature, persistent in action, attempting to achieve **Gender Neutrality** and accepting **Indirect** as well as **Direct Violence**, happening in **Relationships**, at one and the same time.
- **Phase Three—The Third Movement**, the place where we are now, where **Gender Based Violence** is the subject head, where biological, sociological, spiritual and age determinants, impact on solutions, where we are decisive about a **Gender Neutrality** going

towards mainstreaming in rules, procedures, policies and practices, where **Models for Violence In Relationships**, are **Gender Neutral** in nature and **Models** for top management in societies are **Gender Equitable** in nature, where a **Parliament**, maybe the First one in the world, has a **Joint Select Committee on Human Rights, Diversity, the Environment and Sustainable Development**, inquiring into the programmes and services which provide support to victims of **Domestic Violence** and with the **Terms of Reference** of this **Committee**, very forward looking to say the least and a Best Practice Democratic Policy to say the most, notwithstanding, the genuine attempt to achieve a **Gender Equitable Composition** in its nature, 6 men and 4 women, with a woman as the Chairman. A job well done.

As a consequence of the developmental work done in the discipline of Architecture, in an effort to improve Shelter and Settlement Development, including **Violence Reduction**, the natural progression was to use psycho-social learning from research, in a vehicle best suited for outreach and consequently the Organization MAVAW.

THIS IS A BRIEF INTRODUCTION OF THE ORGANIZATION MAVAW.

Men Against Violence Against Women (MAVAW), could be considered to have had a Natural Birth, in that it was a man's idea, put forward and accepted at a forum to deal with rising crime in 1994, hosted by a Feminist Organization, called **The National Women's Caucus (NWC)**. Said idea was to have a **Crime Committee** made up of **concerned men** in society, focusing on **violent male behaviour** and **developing strategies to reduce and eventually stop this male behaviour**.

After functioning for about **nine months** within The National Women's Caucus, the Crime Committee developed into the organization **"Men Against Violence Against Women"** and thereafter, **MAVAW** became an active participant in the **"Men's Movement"**, joining the fifty (50) year old International Men's Movement and the budding Caribbean

Movement, which was **started in Jamaica in 1991**, with the **Fathers' Incorporated Organization**.

MAVAW is a **Proactive way** to take responsibility for **Male Violence** and to contribute towards the creation of a Violent Free Society, i.e. --

1. It puts **Concerned men to Work** and to identify with **Problem Solving**.
2. It allows men trying to **Change**, to achieve **Success**, by **Working** to help others.
3. It tries to reach men in **Denial**, who still live in **Violent Relationships**, by offering them **Support** and a way out.

MAVAWISM therefore, is the ***Pursuit of Equal Rights with Consequent Appreciation for the Differences between the Sexes, Utilizing the Principle of Equity and with an Accent on Bringing Paternal Care back into the Home wherever it is Lacking.***

MAVAW's MISSION is ***to reduce in the first instance and eventually eradicate unacceptable violence in society, with an emphasis on Domestic Violence and Violence Against Women, using a multi-disciplinary approach, focusing on correcting behaviour skill and belief system deficits.***

MAVAW REGISTERED as a ***Non-Profit Company (M 1799 95)*** in August of **1998** and has **three (3) First Directors**, namely: -

- | | | |
|-----------------------|--------------------|------------|
| 1. CHRISTOPHER HOLDER | POLICE OFFICER | CHAIRMAN. |
| 2. DONALD BERMENT | HOUSING SPECIALIST | SECRETARY. |
| 3. DESMOND PERSAD | ACCOUNTANT | TREASURER. |

Fiscal Year—1st July—to—30th June.

Over the period **February 1994 to date—July 1999**, **MAVAW** has recorded **381 Outreach Activities/Efforts**, spanning the full spectrum of **Social Activism**, the most high profile are: --

1. Campaign to have our **Annual Male Awareness Week in December** and our **Annual Fathers' Week in June**, declared International Events on the United Nations Calendar.
2. Promotion of an **Annual Gender Sensitive Calypso Competition**, in order to make full use of our major Cultural Entertainment Season, in our Quest for a Violent Free Society.
3. Campaign to build the **First Transitional Home For Men** In Change Mode.

The Constitution of **MAVAW** is on the attached CD with this Report, along with the other relevant documents describing **MAVAW**, its work and answering the 15 questions in our Terms of Reference.

HERE ARE A FEW HISTORY MILESTONES OF **MAVAW.**

1994 Presentation of the Ripple Effect Theory (RET) on Crime at the Chamber of Commerce National Consultation on Crime, held in the Queen's Hall.

Sat on a Committee to support Senator Diana Mahabir Wyatt's Presentation to the Senate on the Unremunerated Work Bill.

1995 Presentation of a 3—Line Paper on Domestic Violence, in Room 101, UWI's Engineering Building, said paper promoting the concept of Full Cycle Human Resource Management.

Holistic support to then Member of Parliament Ms. Hulsie Bhaggan, for 1 year, because she was alleging that Psychological violence was being done to her.

1996 Review and recommendations submitted to the Ministry of Housing and Settlements, on our Country's Report, to the Habitat II Conference in Istanbul, Turkey.

Initiation of the First Male Awareness week in December, in

collaboration with the then Ministry of Community Development, Culture and Women's Affairs.

Other information on CD.

1997 Sat on a Cabinet Appointed Ad Hoc Committee, to review the 1991 Domestic Violence Act and to make recommendations to correct the problems, experienced by persons using said Act.

First ever Fathers Week Celebrations, held in June, with co-host Power 102 FM Radio.

Other information on CD.

1998 Attended the International Association of Community Police Officers (IAPCRO's) 27th Annual Training Conference at the Trinidad Hilton, titled Embracing the Youth Through Community Policing and delivered a presentation titled The Game of Violence and the Youth Psyche.

Celebrated the 2nd Annual Fathers Week, with a Father's Fiesta Exhibition on Brian Lara Promenade, co-hosted with the newly formed Fathers Who Care, non governmental group.

Other information on CD.

1999 Promotion of the First ever Gender Sensitive Calypso Competition, in order to introduce a new challenge to our local artists, utilizing our major cultural entertainment season.

Planning the publication and distribution of a 65 page Domestic Violence Awareness Handbook, edited by our first Chairman, Police Officer Christopher, which was distributed in 2002 and now revised in PDF format on the CD and in our Cloud Archive www.archive.org. Type donald berment and mavaw in search boxes.

I left Trinidad to go Canada in November. During my stay, completed a 5-month developmental research project titled Violence Reduction Strategies in a Large Multicultural, Racially/Tribally Diverse Country—again using the RET Model. Also planned with the White Ribbon Campaign Team, their first ever Dad Walk, which is celebrated annually on the 15th June, this year being their 15th.

Other information on CD.

2000 Spent 6 months in an Urban Environment, Eastside Plaza, Charlotte Street, preparing and collecting preliminary data for a study titled Examining The Role of Intimacy and Violence in Spousal relationships and its Impact on Poverty in an Urban Environment. Lack of funds prohibited full development of this project, which had 3 components.

Attended the 2nd International Men's Day Celebration at Palms Club, San Fernando, on Sunday the 19th day of November. This day is now celebrated worldwide; go to the site below for data.

www.internationalmensday.org.

Celebrated UN World Aids Day, giving a 3 day Lecture Series, to the Form 1-3 students at Curepe Junior Secondary School.

Other information on CD.

2001 Desktop published the book Parenting Without Tears, a 2 part handbook which teaches how to bring up children without the introduction of violence in their lives, which is on the CD and our Cloud archive and a Healthy Relationships Curriculum, by Canadians.

2002 Distributed our Domestic Violence Awareness Handbook to every Judge and Master of the High Court, Justice of the Peace, Magistrates, Libraries, Parliamentarians, Media Houses, many NGO's

Calypsonians, to name a few.

Proposed the implementation of the Healthy Relationships Curriculum in all Primary and Secondary schools, with a request to the UWI Guild of Students to consider its use on Campus, either in the standard curriculum of all courses and or a mandatory course for Guild members. Our DV Handbook is also there, available to all.

2003 introduced the BSD Syndrome Concept, a Gender Neutral Model to analyze behaviour in dysfunctional relationships, the future in our view, of Domestic Violence analysis and discussion and as an alternative to the much used Duluth Model, which has been heavily condemned, in some quarters and started a Bumper Sticker Programme, using our most poignant One Liners, courtesy ICHRIS Industries Ltd.

Sat on a Cabinet Appointed Multi-Disciplinary Committee, agreed to in June 2003, to examine the Status of the Institution of the Family in Trinidad and Tobago at the Ministry of Social Development and submitted our Report in August 2004

The rest of the years to date will be detailed in the body of our Report. Suffice it to say that the most important Laws, which need a closer examination, are as follows:-

- The Domestic Violence Act, 1999 to make it fully Gender Neutral and empower Domestic Violence Counsellors, approved by Parliament or the relevant Ministry, to play a more active role in the resolution of Domestic Violence matters. At present, DV Counsellors can only appear in Court when they are required to present a report on matters before the Magistrate. This will be further explained later.
- The Constitution of the Republic of Trinidad and Tobago is in

Contravention of Article 6 of the Universal Declaration of Human Rights namely:-

Article 6.

Everyone has the right to recognition everywhere as a person before the law.

When no mention of the female gender is made throughout its content. In addition, the opportunity to bring more young persons to the political environment can be enhanced by lowering the age to be a President and a Senator. Of course a Gender Equitable Parliament Model is yet to be considered by all and sundry...Explained later and on the CD as my 2013 Suggestions for Constitutional Reform.

- The Liquor Act, Chapter 84.10, Part V of the Act, Powers of Licensees, Sect 35 Subsection (1) which reads:-

The authority given to any person by any licence in respect of any premises shall extend in respect of such premises, to his servant, or his wife, a member of his family resident with him.

At present, throughout the 8 Licencing Districts, wives, family members and servants/agents of Licence Holders, approximately 80,000 persons, cannot appear before Magistrates at Liquor Licence Hearings. This has been challenged since February 2014 and not yet opinioned by the Solicitor General. Further explained and shown as Gender Based Violence by a State Institution.

- The National Board Institution is having great difficulty providing timely benefits when due and this after a claim of over 15 Billion in assets. This explained in greater detail in the body of the Report is Gender Based Violence.

- At present persons, 60 years and over, receiving pensions in excess of \$5,000 per month, still have to pay tax on this hard earned income after already paying tax during their work life. In addition, if such persons are employed again in any State or private Institution, their pension is considered income and added to the current salary. This is Financial Abuse and impacts on the behaviour in relationships. My recommendation is for the approval by Cabinet that all pensions, totaling \$15,000, shall not be considered income for annual tax return compilation, making it applicable to persons over 60 years of age, requiring a change in level of Personal Allowances for said persons.
- Finally, having served as the Personal Assistant to a Minister and Member of Parliament for 4 years and 4 months, I have seen the need to equip these hard working members of society with enough Support Staff to them to function at maximum efficiency. In addition, there seems to be problem also with staffing at the Comptroller of Accounts, as reports of long wait for Gratuity Payments is another type of Gender Based Violence by Institutions.

This Report is structured to give Title, Subtitle, Executive Summary, Table of Contents, Introduction, the Body Explanation and Conclusion with the consequent Appendices.

A CD will be supplied providing PDF data on the relevant matters discussed along with the Introductions of Dr. Russell Foote, Donald Berment and Dr. Robert Moultrie. Email versions of all and sundry is also being sent to the Secretary of the Joint Select Committee.

Republic Of Trinidad And Tobago

MAVAW's FORMAL DOCUMENTS.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.-1994.
FIRST DIRECTORS: CHAIRMAN Christopher Holder: SECRETARY Donald Berment: TREASURER Desmond Persad-1998.



Promises
Of
Responsible
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REPUBLIC OF TRINIDAD AND TOBAGO

Men Against Violence Against Women

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DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Friday 18th October 1996

Our Ref.: MAVAW—F1 Your Ref.:

TO WHOM IT MAY CONCERN.

Dear Sir/Madam,

Please find attached, the Formalisation Documents for the Organisation, “*Men Against Violence Against Women*,” *M.A.V.A.W.*

We, as the adults in modern day society and Caretakers of the Future for our Youth, must keep making Positive Steps, in order to stop the Destruction of our beloved Nation and society.

Consequently, “*M.A.V.A.W.*,” as one of those Steps, sincerely Welcome your involvement with us, at any of our Three Functional Levels, you are most comfortable with, or as a Well Wisher.

In addition, the said attached Documents; provide the relevant information that should be necessary for the Registration of “*M.A.V.A.W.*” as a Non-Governmental Organisation (NGO), with you or your Organisation.

Almost three (3) years of Preparation have gone into this Project and we will appreciate the opportunity, to work with you as an Affiliate, Observer, or in Collaboration, whichever applies.

The Growing Social Consciousness of our People, DEMANDS that NGO efforts, provide greater Guidance for our Legislators and Policy Makers, both in the Private and Public domains.

This Universal Effort to bring Peace and Harmony in Relationships must not stop. However, it requires Commitment, Contribution, Co-operation and Mutual Respect.

Hoping to hear from you soon.

Signed DONALD BERMENT Secretary **MAVAW.**

Yours In Nation Building

G.M. Co-ordinators: David Law, Johnny Bharath.

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>.



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Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.
FIRST DIRECTORS—CHAIRMAN—CHRISTOPHER HOLDER—SECRETARY—DONALD BERMENT—TREASURER—DESMOND PERSAD.
REGISTERED NON-PROFIT) COMPANY—NO M 1799 (95)—August 1998. (Charitable Status F(BUD):7/4/205)



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Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



1)

What Is--M.A.V.A.W.?

MAVAW, is a Philosophy, (masculine in concept—human focussed), which seeks to ADDRESS the **Violence Against Women**, in Modern Day Society and by Extension, the VIOLENT RESISTANCE, Expressed by SOME Women, as the Last Resort, to our **Historically Entrenched Male Domination and Oppression**. The academics may want to consider MAVAW, as the Development of the “**Men’s Movement**,” with a Caribbean Flavour and a By-feminism Component.

Consequently, **MAVAW** can be Accessed by **ALL MEN** and Operates at Three (3) Levels of Intensity, see Structure page 7. The COMMON Factor at All Levels, is that MEN Accept the Concept within MAVAW and Affirm to the Promises in the Code P.O.R.O. (Promises Of Responsible Orderlies)

LEVEL 1

At the **Practicing and High Profile Level**, **MEN** who are **Against Violence Against Women** and have a Lifestyle that Reflects their **BELIEF**, can Claim to be **MAVAW’s** and Operate in their Own Space, Contributing to and Participating in the Other TWO Levels of **MAVAW** Activities, as their Growth and TIME Allows.

LEVEL 3

At the **Formal Level** of **MAVAW**, **MEN** will meet and PLAN Strategies, in order to ACHIEVE the **GOALS** of **MAVAW**, within the Management Areas Specified, utilising the Services of a maximum of Three (3) Coordinators and a maximum of Six (6) Assistant Coordinators per Area.

At the **Activist Level**, **MAVAW’s** who can be Comfortable WORKING with Women, in Women’s Organisations, can Affiliate themselves WITH or be Assigned by us TO, such Groups, who will Accept Them or Us, as Affiliate, Associate or Observer Members. All three (3) of our First General Management Coordinators, have Experience Working with Women in Women’s Groups.

One such Member, DONALD BERMENT has been associated with The National Women’s Caucus, for a period of two (2) years and eight (8) months and is one of the TWO MALE Members on the Board of Directors of the National Women’s Caucus Multipurpose Cooperative Society Limited

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Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



2) The Concept.

MAVAW's Concept is that The **PRIMARY VIOLENCE** Being Committed Against Women is a **PSYCHOLOGICAL** One.  That is :-

“Most Men Have Not Accepted Women As Equal Together With Appreciating Them As Different.”

(EXPLANATION)

SOCIALISATION and EDUCATION, both in the Private and Public Domains have Historically Entrenched MALE SUPERIORITY and PATRIARCHY.

The **CONTINUOUS RESISTANCE** to this **OPPRESSION** and the **MENTAL REVOLUTION** that Accompanies this **QUEST for CHANGE**, Requires the Participation of Both **MEN** and **WOMEN**, Working Together as **JOINT Partners** where Possible and **Partners In COMMON** where Necessary.

We as **ENLIGHTENED MEN**, Must Facilitate **CHANGE** and **DEVELOP STRUCTURES** which will Prevent **FUTURE GENERATIONS**, from Inheriting what we **EXPERIENCE TODAY**, or in the **REVERSE**.

(WE WANT CHANGE NOT EXCHANGE)

Psycho-social Analysis have Revealed that there are **THREE TYPES** of Mental Development to Prepare for in our **QUEST for CHANGE**.

- 1) Persons In DENIAL Who Have To Be Reached And Guided Towards CONSCIOUSNESS.**
- 2) Persons In DISTRESS Who Are Becoming CONSCIOUS And Are Willing To Work With And For CHANGE.**
- 3) Persons Who Are Becoming CONSCIOUS And Are ANGRY To The Point Of Seeking EXCHANGE (Women), Or RESISTING CHANGE (Men)**

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



3) **The Code—P.O.R.O.** **(Promises Of Responsible Orderlies)**

P R O M I S E T O G O D .

I Promise, To Always Live By the Guidance Of God and Give Praise,
Honour and Glory To God, In Everything that I Do.

P R O M I S E T O N A T I O N

I Promise, that All My Actions, Shall Be Done With the Desire To Build
and Develop Our Nation and Its People Within the Concept of Democracy.

P R O M I S E T O F A M I L Y

I Promise, To Always Respect Family Life and Give Love, Support and
Understanding, at All Times To My Family, Accepting the Doctrine that
the Family that Prays Together Stays Together.

P R O M I S E T O S E L F

I Promise, To Keep the Promises that I Have Made, Doing My Best To Be
A Role Model and Example To Others, Whilst Respecting Their Opinions
and Individualities.

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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



4) M.A.V.A.W. Goals

- 1)** Inform MEN about our CONCEPT, which is, that the PRIMARY VIOLENCE being committed Against WOMEN is a PSYCHOLOGICAL One, in that MOST MEN have not Accepted WOMEN as EQUAL, Together with Appreciating Them as DIFFERENT.
- 2)** Provide in the First Instance, for EDUCATION and TRAINING of all our MEMBERS and Well Wishers and in the Second Instance, on Request.
- 3)** Locate, Identify and Register, All MEN in Solidarity with our CAUSE, both in CONCEPT and these GOALS, offering them participation in M.A.V.A.W., which is one of the PROACTIVE ways to take RESPONSIBILITY for MALE VIOLENCE and also which will CONTRIBUTE to CREATING a Violent Free Society.
- 4)** Conduct Research generally and Needs Analysis where possible, on the Incidence and Intensity of VIOLENCE IN RELATIONSHIPS, with an Emphasis on DOMESTIC VIOLENCE dedicating ourselves to Reducing and eventually Eliminating, Unacceptable Violence in Society, using a Multi-disciplinary approach, focussing on Correcting Behaviour Skill and Belief System Deficits.
- 5)** Initiate and/or Engage in Social Activism, in order to push Existing and Emerging Societal Problems with Violent Content, TOWARDS Gender Sensitive Social and Educational Solutions.
- 6)** Develop and Maintain, a NETWORK of Committed and Qualified Members and Friends, in order to Provide Both MEN and WOMEN, with Short Term and Long Term Assistance, Physically, Emotionally and Financially.
- 7)** Affiliate With and/or Work alongside, all other Non-Governmental Groups/Organisations, Civil Society and Governments, who share with us, this Common Goal of Reducing and Eventually Eliminating VIOLENT BEHAVIOUR, In and From our Society.
- 8)** Host when Possible and Attend when Invited, Public Meetings, Seminars, Symposiums, Workshops, Consultations, Conferences etc., both Locally and Internationally.

Yours In Nation Building

P.O.R.O.

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.
FIRST DIRECTORS—CHAIRMAN—CHRISTOPHER HOLDER—SECRETARY—DONALD BERMENT—TREASURER—DESMOND PERSAD.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



5) The History And Support.

- 1)** On Saturday 19th February 1994, a Committee which will attempt to Sensitize **Men** on the Crime Issues, to be led by **Donald Berment**, was accepted by the Nation Women's' Caucus (NWC), at their second General Meeting for 1994.
- 2)** Over the last 32 Months (2 years and 8 months to October 1996) **Donald** has been working with other **Men** and **Women**, together and individually, in the Areas of Research, Teaching and Social Activism, Focussing on *Violence Against Women*, **DOMESTIC VIOLENCE** in particular.
- 3)** Two (2) **Men** have stood out as being very Active and Committed in this Joint Effort and work on their own Initiative. They are **David Law**, a Community Liaison Officer with the Ministry for Community Development, Culture and Women's Affairs and **Johnny Bharath**, Corporal Soldier, of the Trinidad and Tobago Defense Force, attached to the Civilian Conservation Corps, 32 months and 10 months respectively.
- 4)** Consequently, based on our Field Observations and in Consultations with Well Wishers, **Donald Berment**, Housing Specialist, **David Law** and **Johnny Bharath** form the Interim General Management Coordinating Team, seeking to Develop **MAVAW**, to the point of Registering as an NGO, Being an Alternative To *Violence* and the Light at the End of the Tunnel for All our Citizens who Exist in *Violent Relationships* and/or Receive *Violent Treatment*.
- 5)** The Major Thrust over the Term, has been Primarily Directed towards Sensitizing as many People as Possible, using the Face to Face Technique, the Print and Electronic Media, the University, Similar Minded Commentators, whilst Helping to Develop other **Men Support Groups**, in the Family Planning Association (FPA), and the Women's Affairs Section of the Ministry. Full Participation in the Developmental Efforts of the Women's Movement in Trinidad and Tobago, was given, for example; Public Marches and Forums, Interactive Media, Seminars etc., was regularly Supported and Attended. Records of same are available for perusal on request.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

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6) The Future.

- 1) MAVAW's Growth and Development is Demanding that a more Intense Effort be Made by MEN working together, in Addition to the Activist Effort completed over the last 2 years and 8 months. We have three (3) Home Based Outreach Locations in the North of Trinidad, one (1) Office Day a Week, in a South Councilors Office and a Proposal from a Rotary Affiliated Resource Group in Central Trinidad, for Another one (1) Office Day, sharing their Office Space.**
- 2) Therefore *Formal MAVAW* (Level 2), has to Consolidate and Prepare itself to Provide Greater Service, Registration and Revenue Collection in order to fund its Future Operations. *Formal MAVAW*, will Accept the **CONCEPT** and Affirm to the **PROMISES** in this Document at pages 2) and 3), Operating within the Management Areas shown on page 7).**
- 3) Each Management Area, will be Guided by a maximum of *Three (3) Coordinators* and a maximum of *Six (6) Assistant Coordinators*, who altogether will make up the Management Membership.**
- 4) We are considering arriving at *MAVAW DECISIONS*, through the Discussion at *General Membership Meetings, General Coordinators Meetings, Specific Coordinators and Specific Assistant Coordinators Meetings*.**
- 5) Registration will be Made with All the Authorities/Bodies so to to do.**
- 6) Accountability and Financial Responsibility will be Achieved by the Standard Methodologies.**
- 7) For the Benefit of Busy Members, Communication will be Available via. Phone, Fax and Postal Measures.**
- 8) Revenue will be Acquired in the Following Ways :-**
 1. Application Fees Of \$25.00.
 2. Monthly **Management Membership** Subscription Of \$20.00
 3. Monthly **General Membership** Subscription Of \$20.00.
 4. Donations From Well Wishers (Financial and In Kind).
 5. Fund Raising Ventures.
 6. Grants for General Development Or Specific Projects.

Yours In Nation Building

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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



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7) Management And Structure.

MEN AGAINST VIOLENCE AGAINST WOMEN.



Areas Of Management (LEVEL 2) Formal.

- | | |
|-----------------------------|----------------------------|
| (1) GENERAL | (2) MEETING |
| (3) FINANCE | (4) PUBLIC RELATIONS |
| (5) AFFILIATION | (6) LEGAL AFFAIRS |
| (7) RESEARCH | (8) EDUCATION AND TRAINING |
| (9) INTERNATIONAL RELATIONS | (10) CONSULTANT SERVICE |
| (11) YOUTH RESOURCE | (12) SECURITY |

**3 COORDINATORS AND 6 ASSISTANT COORDINATORS IN EACH AREA.
FRIENDS AND RESOURCE PERSONS WORK IN LEVEL 3 (ACTIVIST)**

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.

**APPLICATION OF RESEARCH AS THE VEHICLE MAVAW
FROM
FEBRUARY 1994
TO
JULY 2001.**

INTRODUCTION.

Men Against Violence Against Women (MAVAW), could be considered to have had a Natural Birth, in that it was a man's idea, put forward and accepted at a forum to deal with rising crime in 1994, hosted by a Feminist Organisation, called **The National Women's Caucus (NWC)**. Said idea was to have a **Crime Committee** made up of **concerned men** in society, focussing on **violent male behaviour** and **developing strategies to reduce and eventually stop this male behaviour**.

After functioning for about **nine months** within The National Women's Caucus, the Crime Committee developed into the organisation **"Men Against Violence Against Women"** and thereafter, **MAVAW** became an active participant in the **"Men's Movement"**, joining the fifty (50) year old International Men's Movement and the budding Caribbean Movement, which was **started in Jamaica in 1991**, with the **Fathers' Incorporated Organisation**.

MAVAW is a **Proactive way** to take responsibility for **Male Violence** and to contribute towards the creation of a Violent Free Society, i.e.,:--

1. It puts Concerned men to Work and to identify with Problem Solving.
2. It allows men trying to Change, to achieve Success, by Working to help others.
3. It tries to reach men in Denial, who still live in Violent Relationships, by offering them Support and a way out.

MAVAWISM therefore, is the *Pursuit of Equal Rights with Consequent Appreciation for the Differences between the Sexes, Utilising the Principle of Equity and with an Accent on Bringing Paternal Care back into the Home wherever it is Lacking.*

MAVAW's MISSION is *to reduce in the first instance and eventually eradicate unacceptable violence in society, with an emphasis on Domestic Violence and Violence Against Women, using a multi-disciplinary approach, focussing on correcting behaviour skill and belief system deficits.*

MAVAW REGISTERED as a **Non-Profit Company (M 1799 95)** in August of **1998** and has three (3) First Directors, namely: -

- | | | |
|-----------------------|--------------------|------------|
| 1. CHRISTOPHER HOLDER | POLICE OFFICER | CHAIRMAN. |
| 2. DONALD BERMENT | HOUSING SPECIALIST | SECRETARY. |
| 3. DESMOND PERSAD | ACCOUNTANT | TREASURER. |

Fiscal Year—1st July—to—30th June.

Over the period **February 1994 to date—July 1999**, **MAVAW** has recorded **381 Outreach Activities/Efforts**, spanning the full spectrum of **Social Activism**, the most high profile are: --

1. Campaign to have our **Annual Male Awareness Week in December** and our **Annual Fathers' Week in June**, declared International Events on the United Nations Calendar.
2. Promotion of an **Annual Gender Sensitive Calypso Competition**, in order to make full use of our major Cultural Entertainment Season, in our Quest for a Violent Free Society.
3. Campaign to build the **First Transitional Home For Men** In Change Mode.

Activities year by year are listed on the following pages.

(Page 1 of 4)

**APPLICATION OF RESEARCH AS THE VEHICLE MAVAW
FROM
FEBRUARY 1994
TO
JULY 2001.**

THE YEAR—1994.

1. Presentation of **“THE RIPPLE EFFECT THEORY” (RET)** on Crime at the Chamber of Commerce “National Consultation On Crime”, held in the Queens’ Hall.
2. Attended a ten (10) day Training Course, hosted by the Ministry of Social Development, on the Topic, **“Preparing NGO’s to Assist in the Social Service Delivery System”**.
3. Sat on a Committee to support Senator Diana Mahabir Wayatt’s Presentation to the Senate on **The Unremunerated Work Bill**.

THE YEAR—1995.

1. Presentation of a **“3—Line Paper On Domestic Violence”**, in Room 101, UWI’s Engineering Building, said paper promoting the **Concept of Full Cycle Human Resource Management**.
2. Attendance at **Rallies, Processions, Seminars and Exhibitions**, disseminating literature aimed at correcting **Behaviour Skill and Belief System Deficits**.
3. Holistic support to then **Member of Parliament, Hulsie Bhaggan**, for one year, because she was alleging that Psychological Violence was being done to her.

THE YEAR—1996.

1. Attendance at **Rallies, Processions** etc., was also done in Year 1994 and continued thereafter.
2. Review and Recommendations submitted to the Ministry of Housing and Settlements, on our **Country’s Report, to the Habitat II Conference** in Istanbul, Turkey.
3. Presentation titled **“Female Genital Mutilation (FGM): Maximum Male Oppression And Horrific Girl Children Abuse”**, for International Day Against Violence To Women.
4. Presentation titled **“Domestic Violence And The Men’s Movement”**, to a Lunchtime Seminar, at the Centre For Gender and Development studies, on the St. Augustine Campus of the University of the West Indies.
5. Initiation of the First **“Male Awareness Week”** in December, in collaboration with the then Ministry of Community Development, Culture and Women Affairs.

THE YEAR—1997.

1. Sat on a **Cabinet Appointed Ad Hoc Committee**, to review the **1991 Domestic Violence Act** and make Recommendations to correct the problems experienced by persons using said Act.
2. Attended a 3-Day Conference in Barbados, on the Topic **“Gender—Families and Sexual Health: A Spotlight On Males”**, hosted by the International Planned Parenthood Federation.
3. Presentation titled **“Masculinity Construction: A Critique and Experiential Perspective”**, to a Workshop at Holiday Inn on Domestic Violence With a Focus on Male Perpetrators.
4. First ever **“Fathers Week Celebrations”** held in June, with co-host Power 102 Fm Radio.
5. Participant in **UNIFEM, Latin America and Caribbean Section—1 Year Campaign Against Violence Against women**, from November 25th 1997 to December 10th 1998.

Activities continues on the next page.

(Page 2 of 4)

**APPLICATION OF RESEARCH AS THE VEHICLE MAVAW
FROM
FEBRUARY 1994
TO
JULY 2001.**

THE YEAR—1998.

1. Attended **World Bank's 2-Day Working Forums on Youth Development**, at the Crew's Inn, Chaguaramus.
2. Attended the **International Association Of Community Police Officers (IAPCRO's)** 27th Annual Training Conference at the Trinidad Hilton "Embracing The Youth Through Community Policing" and delivered a Presentation titled "**The Game Of Violence and The Youth Psyche**".
3. Presentation titled "**Violence In Relationships: Strategies For Prevention**", to the Sixth (6) Form students of Tranquillity Government School.
4. Attended a 3-Day Gender Sensitization Workshop at Cascadia Hotel, hosted by the Ministry of Culture and Gender Affairs titled "**Training And Sensitization In Gender And Development**".
5. Co-hosted with the Centre For Gender and Development Studies Unit at UWI St. Augustine, a Panel Discussion titled "**Men And The New Gender Relations**", in the ISER Conference Room on Campus, during the 3rd **Annual Male Awareness Week**.
6. Celebrated the 2nd **Annual Fathers Week**, with a "**Fathers Fiesta Exhibition**" on Brian Lara Promenade, co-hosted with the newly formed Fathers Who Care Non governmental Group.

THE YEAR—1999.

1. Promotion of the first "**Gender Sensitive Calypso Competition**", in order to introduce a new Challenge to our Local Artist, utilising our major cultural entertainment season.
2. Planning the publication and distribution of a 65 page "**Domestic Violence Awareness Handbook**", edited by the Chairman of MAVAW, Police Officer Christopher Holder.
3. Attended **Rape Crisis Society's 4-Day Induction (Basic Counselling Training Programme)**, dealing with issues of Sexual and Domestic Abuse.
4. Prepared an Article for a Newsletter of the Women and Development Studies Group, titled "**A Man's View Of Violence Against Women**".
5. Planning a 1-Year Gender Sensitization Project, with the Women and Development Studies Group at the University of the West Indies, titled "**Man To Man: A Training The Trainers Project**", which we hope to start in October of 1999 and end in November 2000 and produce a Manual to guide future training, focussing on Reaching The Man Inside.
6. Discussion with **Prison Authorities, to address inmates Belief and Behaviour Deficits**. All six (6) Institutions are targeted, Carera, Frederick Street Port of Spain, the Youth Training Centre, Maximum Security, Golden Grove Men and Golden Grove Women.
7. Planning with **UNESCO Clubs of Trinidad and Tobago**, a Project for Forms 1—6 boys, aimed at reducing Violence In schools.
8. Left Trinidad in **November of 1999 to go to Canada**. During my stay there I completed a 5-Month Developmental Research Project titled "**Violence Reduction Strategies In A Large Multicultural, Racially/Tribally Diverse Developed Country—Using the RET Model**".

Activities continue on the next page

(Page 3 of 4)

**APPLICATION OF RESEARCH AS THE VEHICLE MAVAW
FROM
FEBRUARY 1994
TO
JULY 2001.**

T H E Y E A R—2 0 0 0.

1. Returned from Canada on Wednesday 5th April 2000. On Saturday 8th April I resumed Co-Supervision of **“The Man To Man: Training The Trainers Project”**, which started in March.
2. Resumed dissemination of information at various fora and intensified radio appearances, which climaxed in a **14-Week—1-Hour Lunchtime Programme, on Radio 104 FM, titled “Talking Gender”**. (*Audio tapes of the programmes are available*)
3. Attended **National Family Services outreach counselling group sessions**, for men and women.
4. Resumed planning with the Prison Authorities and submitted a **Healthy Relationships Curriculum**, called **“Managing Manhood”**, to reach inmates incarcerated for sexual offences.
5. Attended a 2-Day Regional Symposium On Juvenile Justice In The Caribbean, titled **“Towards A Rights Approach For Children”**, at the Crowne Plaza, hosted by the United Nations Children’s Fund (UNICEF).
6. Resumed planning the Non-Violent Project for Forms 1—6 Boys, of the **UNESCO Clubs of Trinidad and Tobago**.
7. Attended the 2nd **International Men’s Day at Palms** Club San Fernando on Sunday 19th Nov.
8. Celebrated **UN World AIDS Day** with a 3-Day Lecture Series for Curepe Junior Secondary School, Forms 1—3.
9. Spent **six (6) months** in an Urban environment, **Eastside Plaza, Charlotte Street**, Preparing and Collecting Preliminary Data for the Study titled, **“Examining The Role Of Intimacy And Violence In Spousal Relationships, And Its Impact On Poverty In An Urban Environment”**. Lack of funds prohibited full development of this Project, which had Three (3) Components.

T H E Y E A R—2001.

1. Continued participating in **Exhibitions and other forums** when invited, disseminating and displaying literature aimed at correcting **Belief System and Behaviour Skill Deficits**.
2. Prepared **Text on Parenting for Desktop Publication**, using Ria Rogers guide to Hassle free Parenting.
3. Hosted with the Women and Development Studies Group, **the Graduation Ceremony of “The Man To Man: Training The Trainers Project”**, in April.

NOTE:

1. Awaiting funding to proceed with some of the Projects outlined above
2. Please use our Website <http://www.mavaw.com>.
3. Please use our Email: mavawsec@yahoo.com.

LET US BUILD A PEACEFUL SOCIETY

By David Law.

WHEN MEN AND WOMEN DO NOT UNDERSTAND THE POWER OF THE EQUATION
SUBTRACTION WILL ALWAYS BE A DISTRACTION
SUPERIORITY MORE OFTEN THAN NOT BREEDS INSECURITY
PLEASE LET US BUILD A PEACEFUL SOCIETY.

WHEN FAMILY VALUES ARE NOW AN ENDANGERED SPECIES
DOMESTIC VIOLENCE STATISTICS JUST A SERIES IN AN EVOLVING MORASS
FORGET THE RACE, JUMP OUT OF YOUR CLASS
LET US BUILD A PEACEFUL SOCIETY.

WHEN SOME OF OUR CHILDREN ARE HOLDING THIS NATION TO RANSOM
CRIME DRUGS VIOLENCE JUVENILE DELINQUENCY MAY NOT GO AWAY EASILY
BLAME IT ON PARENTAL FAILURES, POLITICAL MISERIES
STILL LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR WOMENFOLK ARE TOKENLY HONOURED AND APPRECIATED
GENDER IMBALANCES ARE IMPREGNATED IN OUR CULTURAL PSYCHE
DISMANTLE ALL BARRIERS, ADOPT AN ALL INCLUSIVE PHILOSOPHY
SO WE CAN BUILD A PEACEFUL SOCIETY.

WHEN POVERTY KNOWS NO REGION OR RACE
IT'S TIME FOR US TO SHARE A HUMANE SPACE
BUILD ON SOCIAL CAPITAL, PROMOTE ECONOMIC STABILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR HOMES HAVE BEEN RIPPED APART BY MORAL AND SPIRITUAL DECAY
AND THE ONUS IS ON OUR WOMENFOLK TO KEEP THINGS AT BAY
PRAY FOR OUR MOTHERS, OUR SISTERS TO COPE
THEIR ONLY AMMUNITION, FAITH AND HOPE
WE MUST BUILD A PEACEFUL SOCIETY.

WHEN MEN ABSCOND, TRUE FATHER FIGURES STILL TO BE FOUND
SINGLE PARENTING BECOMES AN ADVERSARY
THE SILENT RAGE OF A GENERATION, IS MORE THAN A TRAGEDY
MEN LET US BUILD A PEACEFUL SOCIETY.

WHEN POLITICIANS PONTIFICATE AND LEGISLATE ON SOCIAL VALUES
PROVIDING ONLY SHORT TERM ECONOMIC CLUES
THE ROAD TO SOCIAL STABILITY IS LONGER THAN FINANCIAL PRUDENCY
LET US BUILD A PEACEFUL SOCIETY.

WHEN HOUSEWIVES ARE NOT ACCEPTED AS HOME MANAGERS
A PERFECT HOME WILL ALWAYS BE A MYTH
GREATER INCOME BUT NO POWER SHARING
IS NOT THE STRUCTURE FOR SOCIAL FAMILY PLANNING
AVOID THE TENSIONS, DO A FEASIBILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN WE AS A PEOPLE BECOME VOID OF RACE, CLASS, COLOUR
AND UNITE WITH ONE VIGOUR
TO ERADICATE THE SCOURGES THAT LIMIT OUR POWER
BUILDING A PEACEFUL SOCIETY
WILL NO LONGER BE A DREAM, BUT A PRACTICAL REALITY
PEACE, LET US SHARE THE PROCESS.

Composed by David Law, one of the Management Coordinators of MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW) for the celebration of International Women's Day 2002 and read by him for the first time at 2.45pm, Friday 8th March 2002 on the Brian Lara Promenade, Independence Square, Port of Spain.

(This was the seventh (7th) contribution to this Day by Men Against Violence Against Women.)



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



What Is The BSD Syndrome?

The **BSD Syndrome** is a local Trinidad and Tobago analytical concept for Domestic and other Violence, being developed by the NGO, "**Men Against Violence Against Women (MAVAW)**." (1994).

This concept utilizes the information, research and expertise already available for people working in the area of Violence Reduction, placing all that is presently being made use off, under the phenomenon of a **Syndrome**, identifying **BSD's** in a number of ways, briefly explained below.

Tons of work has already been done on: -

- **Belief System Deficits, (BSD)**
- **Behaviour Skill Deficits, (BSD)**
- **Biological System Deficits (BSD) and**
- **Baggage System Dependencies (BSD)** by practicing

Psychologists, Psychiatrists, Sociologists, Social Workers, Medical Internists, Building Biologists, Nutritionists, Interior Designers and Housing Specialists/Community Planners.

Unfortunately, rarely do more than one or two of these professionals; focus on the problem of Domestic Violence and/or Societal Violence, at any one point in time or in any single piece of literature, primarily because of academic learning structures and egotistical practices.

What the **BSD Syndrome** will do, is to pool all the relevant data together under a **Syndrome** and spread the gospel of a Holistic approach to solving Violence Problems. In the **BSD Syndrome**, you will realize that violence in relationships is a paradoxical issue. Characteristics identified as BSD's in "**abusive outwards behaviour**", is complemented and also considered "**abusive acceptance behaviour**", recording the paradoxical fact that both parties in a relationship have BSD's.

It is therefore, a philosophical and scientific way to moves from the individual discipline solutions to a multi-discipline solution and depends on the acceptance of the **concept** that no one discipline has the answer for a situation where recurring violent behaviour have a variety of influencing elements.

Consequently, a model of the four (4) main characteristics within the **syndrome** can be used for research, analysis and diagnostic purposes. In addition, programmes for development in the four areas identified above, can be designed to replace the existing unsuitable ones, which in the main, contribute to polarizing the sexes, using inflammatory language, limiting the healing process.

A lot of research has already been collected for editing, prior to the preparation of a multi-authored text titled "**Roots of Societal Violence—Understanding the BSD Syndrome**". A few professionals have already been approached to be part of this ambitious project and in due course, some of the challenging logistics will be hammered into place. The days of using "Batterer", "Victim", "Perpetrators" in violence analysis, are numbered in the minority.

A letter to the Webmaster of the most powerful "male issues" website, Bert Hoff is appended to this explanation for further clarification and description of our work as **MAVAW**.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.

To: berthoff@comcast.net.

REPLY TO BERT HOFF

Date: Wed/15/Oct/03

From: mavawsec@yahoo.com

Hello Bert,

Please accept my sincere thank you, for your quick response and frank comments to/on my Email "Men Against Violence Against Women". Let me also acknowledge here my deep appreciation for your work in maintaining "Men Web" and David Troops' efforts in The Men's' Issues opus. These resources will forever be a tremendous help to all men working on issues which affect men, be it abuse to them, from them, to and from their loved ones and to the environment. Another site to note is www.menagainstviolence.com. The other Email to you, mentioned November 19th, the annual celebration, locally and in the Caribbean of "International Men's Day". My wish is that you hold no objection to this celebration and spread the word to the best of your ability.

The philosophy underpinning reduction and elimination of unacceptable violence, in my view, must accept different methodologies, presentation styles and degrees of healing by the persons involved; all based on their personal levels of emotional, physical and spiritual maturity.

Many men, on first hearing about MAVAW and reading our documents, get the impression that we do not realize the full extent of abuse to men or support them to the same degree, as we do women. A closer perusal of our Formal Documents and our History will show quite the opposite.

For the past five years MAVAW (Men Against Violence Against Women) has been operating a 24-hour HOTLINE 1-868-637-0924 with mailbox and cell phone 1-868-753-0804, so that we can testify to the pain and suffering of both men and women experiencing violence in their relationships. Our members sat on the Cabinet appointed Committee, which reviewed our Domestic Violence Legislation. MAVAW men now sit on the Cabinet appointed Committee, which is analyzing the Status of the Family in Trinidad and Tobago. Our Crime Statistics predominantly record offences by violent young males, a serious concern to us as men, fathers, uncles, brothers, nephews, grandfathers and adults. At last count, 5,494 men were incarcerated in our Prison system and 216 women. A fact we aggressively requested to be noted by the formulators of the first National Gender Policy. As our Documents state "We Want Change Not Exchange"

Every Judge, Master of the High Court, Justice of the Peace, Magistrate, Library, Parliamentarian, Calypsonian, Media House and many NGO's to name a few have a copy of our 2002 Domestic Violence Awareness Handbook. On every occasion possible and there is a very interactive media component here; we challenge men and women on their gender insensitive statements. MAVAW coordinated a 13-week radio programme titled "Talking Gender" emphasizing how both men and women are affected equally by violence in relationships.

At present there are five very important projects, which are getting the support of Men Against Violence Against Women: -

1. Publication of a textbook by member Dr. Russell Foote, "Roots Of Youth Aggression: Home, School and Multilevel Interventions",
2. International Men's Day by friend and supporter of MAVAW PhD candidate Jerome Teelucksingh.
3. "Men's TV" a one hour television programme for men, hosted by member Dr. Robert Moultrie, with half hour interviews and half hour public interaction.
4. The BSD Syndrome Concept, our most important and "people issue" to date (explained below in part, which in my view is the future of Domestic Violence analysis and discussion).
5. A Bumper Sticker Programme, utilizing our most poignant "One Liners.

This **Syndrome** will eliminate the terms now used in the **Violence In Relationships Arena**, terms like **victim, batterer, perpetrator, domestic violence** etc. Within the **BSD Syndrome**, you will understand that Violence In Relationships is a paradoxical issue...Characteristics, which have already been well documented elsewhere, now come together under the umbrella of a Syndrome, and paradoxically, what is considered abusive as “outwards behaviour” is complemented and also considered abusive as “acceptance behaviour”, recording the fact that both parties in the relationship have BSD's. These Characteristics can be explained under 4 Heads, which time and space allows for brief mention here: -

1. Belief System Deficit (BSD)
2. Behaviour Skill Deficit (BSD)
3. Baggage System Dependency (BSD)
4. Biological System Deficit (BSD) and these are the negative components in the Syndrome. The positive action within the Syndrome also termed BSD's, but refer to methodologies utilized to accomplish Development: -
5. Belief System Development.
6. Behaviour Skill Development
7. Baggage System Development and
8. Biological System Development.

This concept scientifically places the Violence In Relationships Issue, into a medium that takes away the stigma and gender polarizing associated with its treatment in the past. We anticipate resistance to this concept by some women, primarily because every statistic, which lists one person being hurt, will also have to list the other person causing the pain, as being hurt too. A lot of women will find that hard to accept, but we hope that in few years time this will change.

In the past MAVAW actively co-hosted Male Awareness Week in December, Fathers' Week in June and fully support the entire Women's Days here. In Canada during the year 2000, we were actively involved with planning the first Dad Walk by the White Ribbon Campaign. This year they celebrated their 4th Dad Walk on the 15th June at the Toronto Zoo. <http://www.whiteribbon.com>. We were also instrumental in changing one Canadian Government programme from “Male Batterers Programme” to “Spousal Abuse Programme”. In Suriname during November 2002, one of the feminist's organisations there, which has progressed to the “people issue” stage, Foundation Stop Violence Against Women, Director Tienke Sumter, Email stopgeweld@sr.net, invited us to participate in a 3-day conference and provide a 4-day training programme for their NGO Sector in the following areas: -

- | | |
|---------------------------------|---|
| 1. Domestic Violence Awareness. | 2. Parenting |
| 3. Healthy Relationships. | 4. Domestic Violence and Interior Design. |

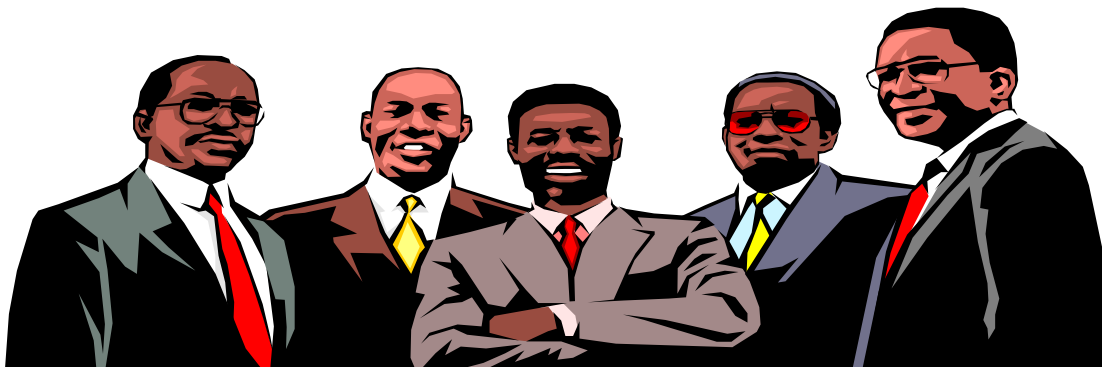
The conference Theme was “Development= Change: From Women Counseling To System Oriented Counseling” and my presentation was titled “The Role Of Men Against Violence Against Women”. Let me acknowledge that it was at a training session with the top managers of this forward looking feminist group that the BSD Syndrome was fine-tuned with their contribution, from just noting the “baggage” as a characteristic to the “Baggage System Dependency”.

What we firmly believe however is that we as men must take responsibility for male violence and do all in our power to reduce and eventually eliminate it from our society (Violence by men against men, women, children and the environment). If women choose to do or not do the same, they will bear the consequences of their action. We are men not God, so judgment is not ours to pass

Please keep in touch Bert and forgive this long Email.

Donald Berment, Secretary MAVAW

M.A.V.A.W.



INTRODUCTION OF DONALD BERMENT—GUEST SPEAKER—2015.

1. An adult male 67 years of age in May 2015, learning to understand and love God more daily and thankful for all the blessings granted to date.
2. A proud father of 1 daughter, an African Princess, 31 years of age, a qualified Cosmetologist, focusing on nail technology.
3. A blessed grandfather of 1 grandson, 20 months in March 2015, homeschooled since he was 3 months and a case study in my developmental psychology work.
4. A hard working citizen of Trinidad and Tobago committed to its Best Democratic Practice Development, which includes a gender equitable Parliament Model and a gender neutral Model for analyzing violent behaviour, aka the BSD Syndrome.
5. Trained in Architecture (3-part Correspondence Course), Real Law (practice in local courts for 8 years) and Psycho-social Development, relevant to Community Lifestyles and Settlement Development (*developmental researcher in the social effects of and construction methods employed in community lifestyles and settlement development respectively, relevant to modern day techniques, with an accent on Tropical Architecture, 3 decades plus to date.*)
6. Operates and functions as a Specialist in Housing and Settlement Development, which includes practice as a Natural Growth Architect and Domestic Violence Counsellor.
7. The Secretary and a Director of the NGO/non-profit Company “Men Against Violence Against Women (MAVAW)”, since 1994 and 1998 respectively, during which time I sat on 3 Ad Hoc Cabinet Appointed Committees (*the 1991 Domestic Violence Act Review in 1997, the Status of the Family in T&T, in 2004 and the National Policy on Gender and Development, in 2012*) and proposed new initiatives for Violence Reduction (www.archive.org type mavaw or my name).
8. Just completed in September of 2014, 4 years and 4 months service to a government Minister, who is a Member of Parliament for a very large Constituency, gaining priceless knowledge in Ministerial Practice and Procedure and Constituency Management, suggesting in 2013 critical Constitution Reforms.
9. Presently continuing my research in Developmental Architecture, adding the Children Studies Component of Developmental Psychology to the 3 decades plus work completed.
10. Completed 4 years of Radio Hosting, 3 years at Radio 103 FM, in the Programme titled “Family Values”, 2008, 2009 and 2010 and 1 year (43—2 hour sessions) at 91.1 FM, Talk City, in 2007, in the Programme titled “Inside The Male Mind—Women Can't Hear What Men Doh Say”.

Yours In Nation Building.

Signed.....HS/NGA/DVC.

Donald Donat Berment.

CONSTITUTION REFORM SUGGESTIONS 2013

BY

DONALD BERMENT.

Feedback/Opinion Form at Page 8 below.

This is needed to solicit support for the changes.

Please fill and return to Donald Berment at

#45 River Estate Circular—Diego Martin or

Email to donaldberment@gmail.com.

MAY 2013

CONSTITUTION REFORM SUGGESTIONS (Act 4 of 1976)

By Donald D. Berment, Sec. MAVAW/PA to Minister/HS.

Based on my 4 Decade plus Research in Housing and Settlement Development Matters in the Diego Martin Area, my 2 Decade plus psychosocial work in violence reduction, especially violence against women, with the NGO Men Against Violence Against Women (MAVAW) and my recently completed 3 year contract as Personal Assistant to Minister Winston “Gypsy” Peters, I have formed the opinion that our 1976 Constitution of the Republic of Trinidad and Tobago, Act No 4 of 1976 needs adjustment in order to example 3 major **GOALS** viz. :-

1. GENDER EQUITY

2. DEMOCRATIC RESPONSIBILITY AND

3. YOUTH INVOLVEMENT AKA. SUCCESSION PLANNING.

Suffice it to say that the historic low turnout of our voting population over the years, the negligent manner in which we do not recognize women as an equal contributor to the National Development Process, alongside the absence of more young persons seeking Parliamentary positions, all of the above having strong evidence bases, altogether underpins the following suggestions for adjusting our present Constitution Act No 4 of 1976.

1. GENDER EQUITY

(i) All references to he, him, his, himself and man must be changed to remove that gender bias/gender blindness to he/she, him/her, his/her, himself/herself and men/women or reword the sections to remove any gender identification, wherever possible.

(ii) Section 39 must now read as follows “There shall be a Parliament of Trinidad and Tobago which shall consist of the President, the Vice President, the Speaker, the Deputy Speaker, a 41 seat Senate and a 41 seat House of Representatives which altogether after a General Elections shall be constructed so that no gender is represented by less than 45% in its total composition (methodology to achieve this is explained below in Goal 2 Democratic Responsibility (iii) to (vii)).

(iii) The enshrined right 4 (c) of Part 1 Chapter 1 i.e. “the right of the individual to respect for his private and family life” must be recognized as providing protection against discrimination to such individuals for their sexual orientation and family life thereof, amending any other law which contravenes said right 4 (c).

(iv) An adjustment has to be made to paragraph (a) in the Preamble by adding “, **women**” after “free men” and “**inclusive of free will, the right of choice**” after “their Creator”.

(v) The **Holy Bible** notes that **God** gave **Commands** and made **Statements** on different issues, understanding at all times that we were given free will to choose to follow those **Commands**, or adhere to those **Statements** personally. Therefore any person who stands up and speaks as if they were given specific **Directions from God personally** or have **been chosen personally by God to take Actions** on these **Commands** or **Statements**, as it relates to another person’s behaviour, should be asked to declare, when and where those **Directions** were given by **God** and also when and where **God** chose them to take such **Actions**.

2. DEMOCRATIC RESPONSIBILITY.

(i) **General Elections** must be held every five (5) years at the end of June and be for the Parliament as suggested in **GOAL 1 (ii)** above.

(ii) **Local Elections** must be held every four (4) years at the end of June and shall follow in similar mode as **General Elections** in order to achieve **Gender Equity**, with the final composition of each City, Borough and Regional Corporation having no less than 45% of each gender represented in its total composition.

(iii) The methodology for a successful **Gender Equitable Parliament, City, Borough and Regional Corporation** is to have a man and woman pair of Candidates in each Constituency at **General Elections** and in each Electoral District at **Local Elections** by all Political parties and Independents. Within 3 days after both Elections, meetings by all Political parties, Candidates and Independents, shall determine what the final composition in **Parliament** and **Local Elections** shall be, with the aim to achieve no less than 45% of any gender being represented.

(iv) In the instance of a **General Election**, the winning pair, either from a Political party or Independents, collecting the largest number of votes in each Constituency shall have one (1) person going to the 41 seat House of Representatives as the **Member of Parliament** and the other person going into their main Constituency Office as Manager/Research Officer, paid by Parliament.

(v) The losing pair either from a Political party or Independents, getting the second largest number of votes in each Constituency shall have one (1) person going to the 41 seat Senate as a **Senator** and the other person going into their main Constituency Office as another Manager/Research Officer, paid by Parliament.

(vi) In the said **General Election**, a man and woman pair, not belonging to any Political party, shall offer themselves for the Presidency and Speaker positions. The winning pair for Presidency shall produce a President of the Republic of Trinidad and Tobago and a Vice President, who will also be the President of the Senate. The Vice President of the Senate shall be chosen as the Senate's first act on commencement. The winning pair for the Speaker position shall produce the Speaker of the House of Representatives and a Deputy Speaker of the said House of Representatives, respectively. These can be chosen in the final mix to achieve the **Gender Equitable Goal**.

(vii) In the instance of a **Local Election** the winning pairs from a Political party, collecting the largest number of votes from all the Electoral Districts shall have a **Councillor** from each District won and choose from the other persons in the winning pairs a **Chairman** or **Mayor** of the Corporation, Borough or City respectively. Aldermen shall be chosen from the persons, either from Political parties or Independents collecting the second largest number of votes, bearing in mind that the overall objective is to achieve no less than 45% of any gender being represented in the final composition of the City, Borough or Regional Corporation.

(viii) All Committees of the Senate and House of Representatives shall be formulated in the first instance from the Candidates who face General and Local Elections, either from Political parties and as Independent pairs and are not placed elsewhere. This includes the Candidates for President, Vice President, Speaker and the Deputy.

(ix) The people's right to be governed justly and in time is hindered by the length of time **Bills** which are passed by the **House of Representatives** and the **Senate** are Assented to by the **President**. Therefore, in the first instance, a Committee of six (6) persons shall be appointed from Candidates who acquired a reasonable amount of votes at **General Elections**, to advise the **President** on **Bills** needing his Assent. In the second instance, another Committee of six (6) persons shall be appointed from Candidates who also acquired a reasonable amount of votes at **General Elections**, to advise the President on Reports needing his attention, before being laid in **Parliament**.

(x) If the **President** withholds his Assent, the reasons must be conveyed to **Parliament** within one (1) month of that decision. Thereafter, both houses of **Parliament** shall deliberate on the **President's** reasons, either agreeing with them, amending the legislation, or disagreeing with them and Assenting to the **Bill** by "**Special Privilege**" of **Parliament**, making it law. Under no circumstances must any Bill stay without Assent longer than **six (6) months**, in a state of non-attention.

3. **YOUTH INVOLVEMENT AKA. SUCCESSION PLANNING.**

(i) The consciousness and responsibility to engage the young minds and hearts of developing Trinidad and Tobago must be clearly evident and amplified in the way we chart the Constitutional Path for the **Best Practice Democratic Growth** in our twin-island State.

(ii) Firstly, building on our above mentioned **Gender Achievement** of the man and woman **Candidate Pair Representation** at **General** and **Local Elections**, the age limit at (section 23) of thirty five (35) years for qualifying to be the **President** of the Republic of Trinidad and Tobago shall be reduced to thirty (30) years.

(iii) Secondly, the age limit for qualifying to be a **Senator** (at Section 41) shall be reduced to twenty one (21) years from twenty five (25) years.

(iv) (Section 47) states that the qualifying age to be elected as a member of the **House of Representatives** is eighteen (18) years. This age set can remain, but if a difficulty arises to place losing

Candidates at General Elections in the **Senate** who are eighteen (18) years of age, the qualifying age can move from (18) to twenty one (21) years.

(v) In the instance of the appointment of persons to the **Special Offices** noted in (Section 135 and 136), the **Ambassadors. The High Commissioners and Principal Representatives of Trinidad and Tobago** in any other country, the age set to vacate such Special Office, should move from sixty five (65) to seventy five (75), but if such persons can provide medical evidence of above average good health, the age to vacate can be set to eighty (80) years.

(vi) Every person contesting either the **General or Local Election**, or considering being a member of the **Personal Staff of Ministers, Members of Parliament and Parliamentary Secretaries** shall attend not less than 90% of a Training Programme during the first three (3) months, January to March, in every Election year. This Training Programme shall be of ninety (90) hours duration, one (1) day per week, for three (3) hours, for thirteen (13) weeks, minimum. The content designed to provide a thorough understanding of the day to day responsibilities/operations in Parliament, Cabinet, Constituencies, Ministries and the President's Office. The April to June period in the same Election year shall be reserved for Election Campaigning.

(vii) All Committees of the **Senate**, the **House of Representatives** etc. shall be formulated from the other pairs of **Candidates**, who contest the **General Elections**, obtaining five (5) to ten (10) percent of the total votes, as the first option.

(viii) All **Elected Representatives** from both the **General and Local Elections** shall be allowed to serve for two (2) consecutive **Terms** or ten (10) years, **General** and eight (8) years **Local**, whichever is applicable. A period of two (2) **Terms** or ten (10) years, whichever is applicable, shall pass before the said **Elected Representatives** can offer themselves as **Candidates** in another **General or Local Election**, giving maximum opportunity for **Youth Involvement** aka. **Succession Planning**.

(ix) The remuneration packages for all **Personal Staff** shall be made commensurate with the duties to be performed whilst directing that all the relevant equipment and software be supplied to them as needed.

(x) The power of **Service Commissions** to retire persons in the public interest as exemplified at (Section 123 Clause 8 Sub clause (e) (ii)) should be removed. This is a very efficient way to destroy the future employment prospects of such persons, especially in the absence of Employment Assistant Programmes (EAP's), in most State Institutions. More damaging is the status and stigma of being a danger to the public interest, which eventually impinges on their social life, self-esteem, self-confidence and marital prospects. Having that personal experience, being retired in the public interest at age 30 years, primarily because of an intimate relationship I had with a staff member who was being courted by the Chief Executive Officer of the National Housing Authority at that time, I can testify to the damage done by a State Authority classifying a person as unfit to work for the public. The only redeeming factor in that action is the time available to do research, for one so inclined, but this can be limited to Developmental Research work, as the money for publishing material is still unavailable.

(xi) Finally, every citizen, on attaining the age of sixty (60) years in the Republic of Trinidad and Tobago should not have his/her pension, up to ten thousand dollars (10,000TT) attached to any other income they derive for tax purposes.

All of the above, in my humble view shall produce a Constitution relevant to the vibrancy, energy and potential of our population, allowing for maximum people participation at **General** and **Local Elections** and give the people the power to have their own choices of **Representatives**, a positive step towards **BEST PRACTICE DEMOCRACY**, making Trinidad and Tobago a Role Model Nation in the annals of the growth of Democracy.

Signed.....Sec MAVAW/PA to Minister/HS, NGA.

Donald Berment

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DONALD BERMENT—SECRETARY
COUNSELLOR—DIRECTOR.

FEEDBACK/OPINION PAGE.

Occupation:

Age (optional):

Sex: Male

☐

Female

☐

Please give your comments on the 3 Major Goals described from page 2 to 7.

1. GENDER EQUITY:

2. DEMOCRATIC RESPONSIBILITY:

3. YOUTH INVOLVEMENT AKA. SUCCESSION PLANNING:

THANK YOU FOR YOUR KIND ATTENTION

FAMILY VALUES RADIO PROGRAMME 2008.

A JOINT PROJECT BY MAVAW AND 103 FM—the First the Finest.

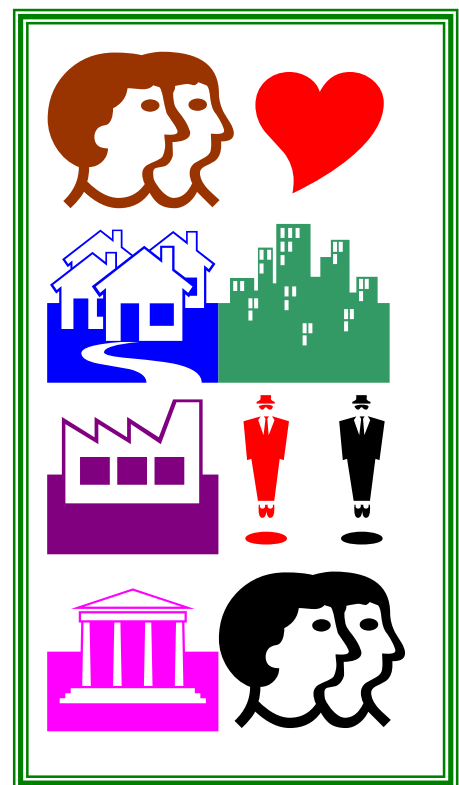
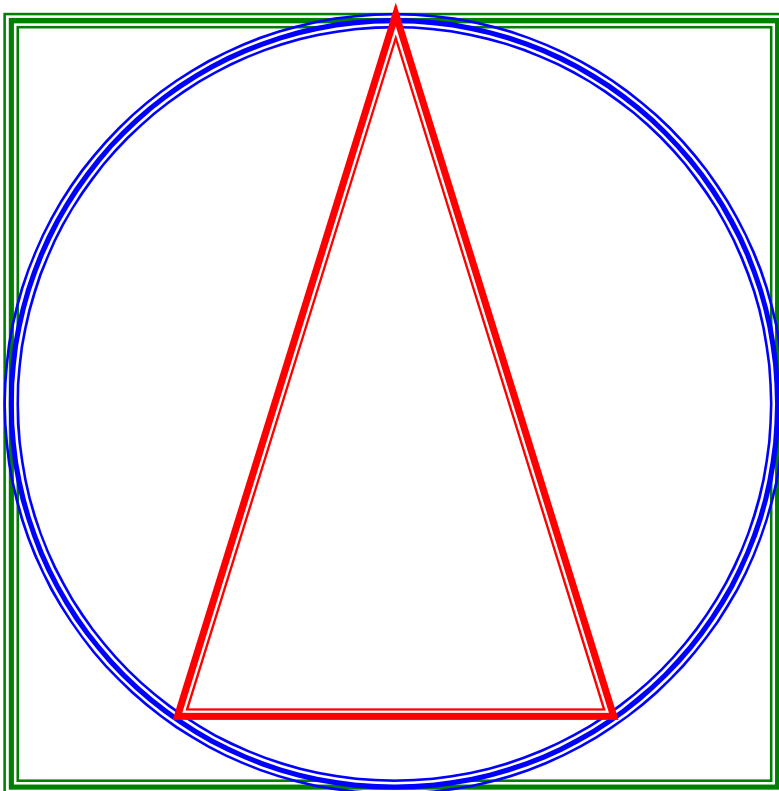
MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW)



Twenty-First Century

**2008 Joint Project by M.A.V.A.W. and
103 FM—the First the Finest.**

A Culture Of Peace



Directors: **Christopher Holder, CHAIRMAN.** **Donald Berment, SECRETARY.** **Desmond Persad, TREASURER.**
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
Yours In Nation Building.

**FAMILY VALUES WITH MAVAW AND RADIO 103FM—THE FIRST THE FINEST
2008 LIST OF PROGRAMMES.**

No	Date	Topic	Guest & Host D. Berment	Announcer
1	Wed/23/Apr/08	Intro/Food and the Family	D. Law & D. Henderson	C. Dookie
2	Wed/30/Apr/08	Children of the Family	Prof. Jaipaul Roopnarine	C. Dookie
3	Wed/7/May/08	Family Life and Health	Dr. Robert Moultrie	C. Dookie
4	Wed/14/May/08	Family Life and Education	Dr. Russell Foote	C. Dookie
5	Wed/21/May/08	Parenting and Male Roles	Ralph Heera Soc. Dev.	C. Dookie
6	Wed/28/May/08	First Review/Evaluation	D. Berment & C. Dookie	C. Dookie
7	Wed/4/June/08	Healing Families with OCM	Mr. Reynold Brown	C. Dookie
8	Wed/11/June/08	National AIDS Hotline	Ms. Helena Joseph	S. Ramdeo
9	Wed/18/June/08	Manage Family Budgets	Ms. Hazel Brown	S. Ramdeo
10	Wed/25/June/08	YMCA and the Family	S. Grant, E. Nurse, A. Smart	S. Ramdeo
11	Wed/2/July/08	Rape Crisis Society	Ms. Marcella Alcala	S. Ramdeo
12	Wed/9/July/08	Second Review/Evaluation	D. Berment & S. Ramdeo	S. Ramdeo
13	Wed/16/July/08	Health Care Watch Prog.	Dr. N. Muradali	S. Ramdeo
14	Wed/23/July/08	Special Education School	Ms. Judith. De Verteuil	S. Ramdeo
15	Wed/30/July/08	Family Planning Outreach	L. Smith & A. Mayanard	S. Ramdeo
16	Wed/6/Aug/08	Homelessness in T & T	Dr. Lennox Grant	S. Ramdeo
17	Wed/13/Aug/08	Development and Family	Dr. Lincoln Douglas	S. Ramdeo
18	Wed/20/Aug/08	Third Review/Evaluation	D. Berment & S. Ramdeo	S. Ramdeo
19	Wed/27/Aug/08	Families In Action	I. Gibson/Dr. Foote Host	S. Ramdeo
20	Wed/3/Sept/08	Open House Discussion	D. Berment & S. Ramdeo	S. Ramdeo
21	Wed/10/Sept/08	Parenting and Education	Dr. Lincoln Douglas	S. Ramdeo
22	Wed/17/Sept/08	Rebirth House Service	Mr. Vincent Mejaries	S. Ramdeo
23	Thur/25/Sept/08	Budgeting and Family	D. Berment & S. Ramdeo	S. Ramdeo
24	Wed/2/Oct/08	T & T budget Analysis	D. Berment & S. Ramdeo	S. Ramdeo
25	Wed/8/Oct/08	Legal Aid & Adv. Auth.	Ms. Nancy Arneaud Llb.	S. Ramdeo
26	Wed/15/Oct/08	TTARP and the Family	Manager Kern Williams	S. Ramdeo
27	Wed/22/Oct/08	Family Disintegration	Dr. Sharon Mc Nicolls	S. Ramdeo
28	Wed/29/Oct/08	Fourth Review/Evaluation	D. Berment & S. Ramdeo	S. Ramdeo
29	Wed/5/Nov/08	Sustainable Family Dev.	M.P. Winston Peters	S. Ramdeo
30	Wed/12/Nov/08	Restorative Justice	Adrian Alexander Llb.	S. Ramdeo
31	Wed/19/Nov/08	International Men's Day	M. Augustus/R. Moultrie	S. Ramdeo
32	Wed/26/Nov/08	IDAVW and Latinos	A. Briceno/Fr. J. Latan	S. Ramdeo
33	Wed/3/Dec/08	Alcohol Abuse in a Family	Family/D. Law Host	S. Ramdeo
34	Wed/10/Dec/08	YMCA Human Rights Day	M. Richardson/S. Leitch	S. Ramdeo
35	Wed/17/Dec/08	Service Institutions in T&T	D. Berment & S. Ramdeo	S. Ramdeo

Notes:

1. Very good response to Programme on Air and during 1 hour Peer Counseling sessions after.
2. No Programmes held on Christmas Eve and Old Year's Day.

Signed.....Donald Berment—Signed.....Hemant Saith. 1

FAMILY VALUES –FACT SHEET-No. 1

MAVAW sat on the recently completed Cabinet Ad-Hoc Multi-Disciplinary Committee to Examine the Status of the Institution of the Family in Trinidad and Tobago and I am proposing that we use the definition of the family used by that Committee to proceed with the Programme, which is as follows: -

- The family is a structure that is a set of relationships and a space, which creates an environment where the social, psychological, physical, spiritual and economic needs of individuals are constantly interfacing. It is an environment in which individuals relate to one another in a variety of capacities and in which the problems of everyday life are worked out. UN 1996.

The Executive Summary of the Report accepted by the Committee, noted that our study found **the family to be the core socializing agency and impacts upon its environment, conversely the environment also impacts on the family.** Some systems in the environment that significantly influence the values and way of life of families are; *the education and legal systems, religion, the media and the community, with which the families interact on a continuous basis.*

The Challenges to Family Life were identified as follows: -

- Disadvantaged economic situation of low income families, particularly single parent families.
- Poor parenting skills and practices.
- Poor socializing skills in some instances.
- Insufficient and ineffective communication within some families.
- Poor and at times abusive methods of discipline.
- The negative influence of the media/cable
- Migrant and absentee parents.
- A drug culture and its associated criminal sub-culture.
- Changes in community and societal values.

The local data revealed that the most common family form was the unions by marriage. The next most common family form was the extended family followed by single parents, persons living alone and common-law unions. There was a 15% decrease in the number of marriages over the period 1980-2000 and a noticeable increase of approximately 67% in the number of divorces for the same period. The data also reflected a high incidence of domestic violence and family disputes in Trinidad and Tobago.

FAMILY VALUES—FACT SHEET NO 2—PROPOSED FAMILY CODE OF ETHICS.

A code of ethics is a set of statements about appropriate and expected behaviour of members of a professional group, family, school etc. and as such, reflects its values.

The Proposed Family Code of Ethics to be considered and penned in these weeks of the FAMILY VALUES PROGRAMME 2008 by our 103 Family and all other listeners to this specific Programme, with any input from the early childhood field, will be presented to the major policy makers for analysis, acceptance and implementation.

The Proposed Family Code of Ethics will be owned by us, not imposed upon us and is intended for use by all adults in a family environment who work with and on behalf of children, in addition to early childhood professionals doing the same work with children and also with families in early childhood settings.

The Proposed Family Code of Ethics will also give equal focus to the relationships between adults in the family environment and reflect the best practice for cementing a CULTURE OF PEACE in the familial context.

‘Wise moral decisions will always acknowledge our interdependency; our moral choices are ours alone, but they bind us all to those who will be affected by them. So deciding for yourself what’s right or wrong does not mean deciding in isolation’ (Mackay, 2004, p. 242).

New research has allowed significant changes in understandings to emerge that reposition children as citizens with entitlements and rights. Increasingly, children are seen as competent and capable and able to participate in the negotiation of their learning and social experiences.

Additionally, societal and environmental changes at the local, national and global levels impact on children and families with consequent implications for parenting practices and those who work with them.

In recognition of the impact of globalisation and global sustainability, this Proposed Family Code of Ethics will identify ethical responsibilities to work with children and families in order to address global issues locally.

Just as the world has changed for children and families, so it has changed for parents, caregivers and professionals who work with them.

The notion of lifelong learning, reflective practice, researching with children, new methods of documenting and assessing children’s learning, and collaborating across traditional service and discipline boundaries, the

FAMILY VALUES—FACT SHEET NO 2—PROPOSED FAMILY CODE OF ETHICS.

mutual importance of the caregivers holistic development are examples of contemporary requirements for early childhood professionals and parents.

Inherent in this *Proposed Family Code of Ethics* will be the understanding that children learn within their family and community groups, bringing rich knowledge, a diversity of experiences and identities to their learning.

Sociocultural theories have moved our focus beyond individual children's development to highlight the importance of social contexts to children's learning and development. As children participate and learn in their communities, they in turn influence those communities.

Early childhood communities ought to be spaces and places where practices such as responsive listening and dialogue can build connections and relationships which sustain and advance individual and collective wellbeing.

This *Proposed Family Code* is not intended to and could not possibly provide easy answers, formulae, or prescriptive solutions for the complex issues families face and by extension the early childhood professionals who work with them. As an *aspirational document*, it will provide a basis for critical reflection, a guide for professional behaviour and principles to inform individual and collective decision-making.

The following values and processes are considered central to the Proposed Family Code of Ethics:

- | | |
|---------------------------------------|--------------|
| • Respect | Education. |
| • Spirituality. | Inclusivity. |
| • Understanding | Courage. |
| • Democracy | Justice. |
| • Honesty | Integrity. |
| • Social and cultural responsiveness. | Morality. |

The Statements in the Family Code of Ethics could include the following: -

1. In relation to our children, I will: -
2. In relation to my spouse, I will: -
3. In relation to the other adults in the family, I will: -
4. In relation to my Community, I will: -
5. In relation to myself, I will: -

Some of the above Data used was taken from the Early Childhood Australia Code of Ethics 2006.

LET US BUILD A PEACEFUL SOCIETY

By David Law.

WHEN MEN AND WOMEN DO NOT UNDERSTAND THE POWER OF THE EQUATION
SUBTRACTION WILL ALWAYS BE A DISTRACTION
SUPERIORITY MORE OFTEN THAN NOT BREEDS INSECURITY
PLEASE LET US BUILD A PEACEFUL SOCIETY.

WHEN FAMILY VALUES ARE NOW AN ENDANGERED SPECIES
DOMESTIC VIOLENCE STATISTICS JUST A SERIES IN AN EVOLVING MORASS
FORGET THE RACE, JUMP OUT OF YOUR CLASS
LET US BUILD A PEACEFUL SOCIETY.

WHEN SOME OF OUR CHILDREN ARE HOLDING THIS NATION TO RANSOM
CRIME DRUGS VIOLENCE JUVENILE DELINQUENCY MAY NOT GO AWAY EASILY
BLAME IT ON PARENTAL FAILURES, POLITICAL MISERIES
STILL LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR WOMENFOLK ARE TOKENLY HONOURED AND APPRECIATED
GENDER IMBALANCES ARE IMPREGNATED IN OUR CULTURAL PSYCHE
DISMANTLE ALL BARRIERS, ADOPT AN ALL INCLUSIVE PHILOSOPHY
SO WE CAN BUILD A PEACEFUL SOCIETY.

WHEN POVERTY KNOWS NO REGION OR RACE
IT'S TIME FOR US TO SHARE A HUMANE SPACE
BUILD ON SOCIAL CAPITAL, PROMOTE ECONOMIC STABILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR HOMES HAVE BEEN RIPPED APART BY MORAL AND SPIRITUAL DECAY
AND THE ONUS IS ON OUR WOMENFOLK TO KEEP THINGS AT BAY
PRAY FOR OUR MOTHERS, OUR SISTERS TO COPE
THEIR ONLY AMMUNITION, FAITH AND HOPE
WE MUST BUILD A PEACEFUL SOCIETY.

WHEN MEN ABSCOND, TRUE FATHER FIGURES STILL TO BE FOUND
SINGLE PARENTING BECOMES AN ADVERSARY
THE SILENT RAGE OF A GENERATION, IS MORE THAN A TRAGEDY
MEN LET US BUILD A PEACEFUL SOCIETY.

WHEN POLITICIANS PONTIFICATE AND LEGISLATE ON SOCIAL VALUES
PROVIDING ONLY SHORT TERM ECONOMIC CLUES
THE ROAD TO SOCIAL STABILITY IS LONGER THAN FINANCIAL PRUDENCY
LET US BUILD A PEACEFUL SOCIETY.

WHEN HOUSEWIVES ARE NOT ACCEPTED AS HOME MANAGERS
A PERFECT HOME WILL ALWAYS BE A MYTH
GREATER INCOME BUT NO POWER SHARING
IS NOT THE STRUCTURE FOR SOCIAL FAMILY PLANNING
AVOID THE TENSIONS, DO A FEASIBILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN WE AS A PEOPLE BECOME VOID OF RACE, CLASS, COLOUR
AND UNITE WITH ONE VIGOUR
TO ERADICATE THE SCOURGES THAT LIMIT OUR POWER
BUILDING A PEACEFUL SOCIETY
WILL NO LONGER BE A DREAM, BUT A PRACTICAL REALITY
PEACE, LET US SHARE THE PROCESS.

Composed by David Law, one of the Management Coordinators of MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW) for the celebration of International Women's Day 2002 and read by him for the first time at 2.45pm, Friday 8th March 2002 on the Brian Lara Promenade, Independence Square, Port of Spain.

(This was the seventh (7th) contribution to this Day by Men Against Violence Against Women.)



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. Fax: 637-0924. Cell 383-6184.

Email: mavawsec@yahoo.com. Web Site: <http://www.mavaw.com>.



DIRECTORS: Christopher Holder, *CHAIRMAN*. Donald Berment, *SECRETARY*. Desmond Persad, *TREASURER*.

Date: Thur/24/Apr/08

Our Ref: mavaw/103/FV-1R

Your Ref:

Mr. Hemant Saith,
Programme Director/Head of News,
103FM,
Level 4, Long Circular Mall,
St. James,
PORT OF SPAIN.

SUBJECT: REPORT ON INAUGURAL
"FAMILY VALUES" PROGRAMME HELD
WEDNESDAY 23RD APRIL 2008.

Dear Hemant,

The three MAVAW members who attended the first "Family Values" Programme at Subject Head believe that the 1 hour session went quite well. David Law, our Assistant Secretary/Director and Dwayne Henderson, one of our vibrant young members and myself were very pleased to interface with the 103 Family and we felt at home with the friendly, efficient announcer Ms. Cheryl.

As we had discussed, after the Introductions, I indicated what MAVAW will like to accomplish with this outreach effort and the proposed structure of "Family Values". We hope to engage our listeners in a "Poetry Segment", reading the poems submitted by the 103 Family, relevant to the topic under discussion, in the main, indirectly acknowledging the inherent talent of and inviting expressions of concern from the 103 family.

We are also hoping to have our listeners submit suggestions for the development of a "Family Code of Ethics", which will be indigenous to Trinidad and Tobago as far as possible and which we feel can be most effective with a collaborative spirit.

These challenges/interaction apart, the work done by Fazeer Rojan on the CD Hanifa, has tremendous value for "inspiration building" and it is our sincere desire to use short pieces from this CD to end the Programme. His consent has already been obtained and Fazeer being part of the in-house 103 Family, I feel committed to treasure such beautiful effort.

Of course the Programme is going to focus on "assisting the listeners" in their daily attempts to face the many issues pertinent to Family Life in our beloved Trinidad and Tobago and your suggestion to deal with the giveaways after the programme is timely, since it is going to give MAVAW the opportunity to do some qualitative telephone analysis of family situations in the target market, discreetly and with full confidentiality.

The 1996 UN definition of the Family was then introduced and some aspects of the most comprehensive study done on Family Life to date identified.

Out of the approx. 8 call-ins, only 3 got through and profited from our first three giveaways: -

1. MAVAW's signal Poem by David Law "Let Us Build a Peaceful Society"
2. MAVAW's Parenting Manual and

3. A dinner for two at our member Dwayne's, Italian Restaurant, to the value of \$TT 300.00.

The *three callers* who got through, although their names were given on "air", I can supply to you on request, allowed us the first attempt at qualitative telephone analysis.

- Caller one, from Tunapuna, who has asked me to mail the *laminated poem* to her, is in an extended family, stays at home whole day and stays tuned to 103 throughout, from 4am to bedtime. She is most likely the grandmother, whose son or daughter live with a spouse and two children, all 103 listeners. She was moved to tears by Fazeer's Piece on mother, as she had been very close to hers, which was why I was so moved when I first heard it too. She feels that this Programme should be re-run in the night so that the rest of the family can also hear it. Suggested time between 9pm and 10pm on a Saturday or Sunday.
- Caller two, from Diego Martin, who has asked me to bring the *Parenting Manual* to her, lives in a sort of nuclear family, visiting father, ailing son, a pair of twin teenage daughters and an avid listener of 103 at home. She also has a cell phone with radio and headset at work so she can do her factory work and still participate in call-ins. Her daughters will profit from this text and was very glad to have material to further their "life skills" development. She has also been very moved by Fazeer's piece and will definitely want to hear re-runs of the Programmes at the same time and date.
- Caller three, from Point-a-Pierre, who won the dinner for two to the value of \$TT 300.00, is in a nuclear family, husband and three children, 11, 13 and 15 and is also an avid 103 listener at home in the afternoon, leaving for work at 4am, and from work between 7am to 3pm. Saturday is the day of choice for the dinner for two but she will like to bring the whole family for dinner, bearing whatever extra cost for the three children, because she is very family conscious and plans activities for family involvement. Again she feels that this type of programming has tremendous value for family development and if is re-run at night, preferably on a Saturday night between 8pm and 10pm, she will "instruct" her children to listen, although they are TV and Computer fans. She did not hear the Fazeer piece.

I will be able to provide you with data which is going to be relevant to the marketing aspect of 103's operation; however, other data related to the counselling function of MAVAW's operation, is going to be recorded in our standard manner.

Our sincere thanks again and I anticipate help from the Ministry of Social Development will be soon forthcoming.

Signed.....Donald Berment, Secretary MAVAW.

Yours In Nation Building
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
G.M. Co-ordinators : David Law, Johnny Bharath.-
P.O.R.O.



Children Live What They Learn.

The Child Who Lives With Criticism
Learns To Condemn.
The Child Who Lives With Hostility
Learns To Fight.
The Child Who Lives With Ridicule
Learns To Be Shy.
The Child Who Lives With Shame
Learns To Feel Guilty.
The Child Who Lives With Tolerance
Learns To Be Patient.
The Child Who Lives With Encouragement
Learns To Be Confident.
The Child Who Lives With Praise
Learns To Appreciate.
The Child Who Lives With Fairness
Learns To Be Just.
The Child Who Lives With Security
Learns To Have Faith.
The Child Who Lives With Approval
Learns To Like Themselves.
The Child Who Lives With Acceptance And
Friendship
Learns To Find Love In The World.

--Author Unknown--.



FAMILY VALUES WITH 103 FM

AND

*MEN AGAINST VIOLENCE AGAINST WOMEN
(MAVAW)*



SIGNED.....DONALD BERMENT, SECRETARY MAVAW.

SIGNED.....HEMANT SAITH, PROGRAMME DIRECTOR, 103 FM

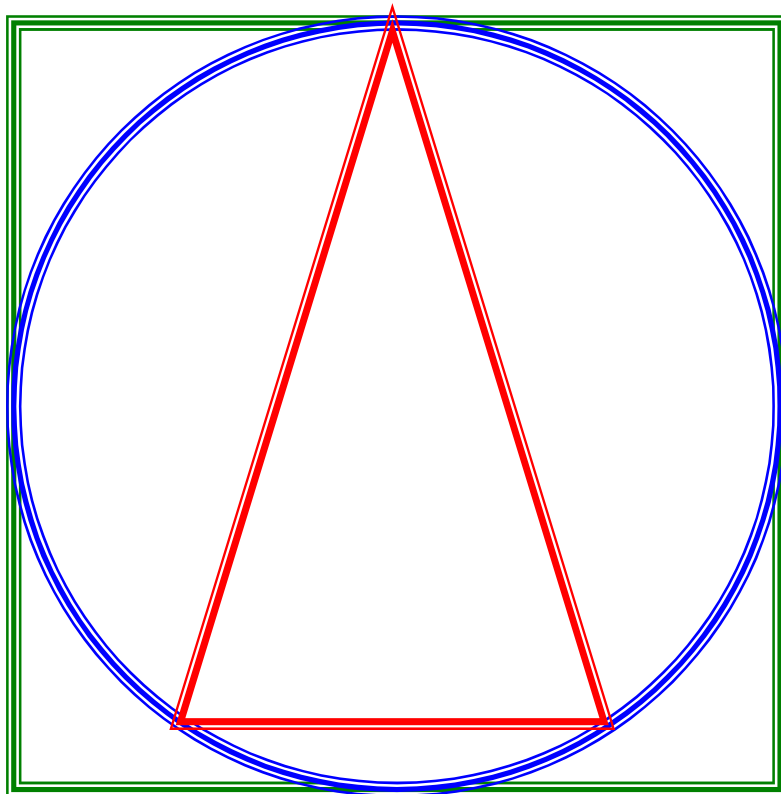
M.A.V.A.W.'s Vision



FOR THE

TWENTY-FIRST CENTURY

A Culture Of Peace



YOURS IN NATION BUILDING.

INTRODUCTION TO THE BSD SYNDROME.

A JOINT PROJECT BY MAVAW AND A TEAM OF SELECTED PROFESSIONALS.

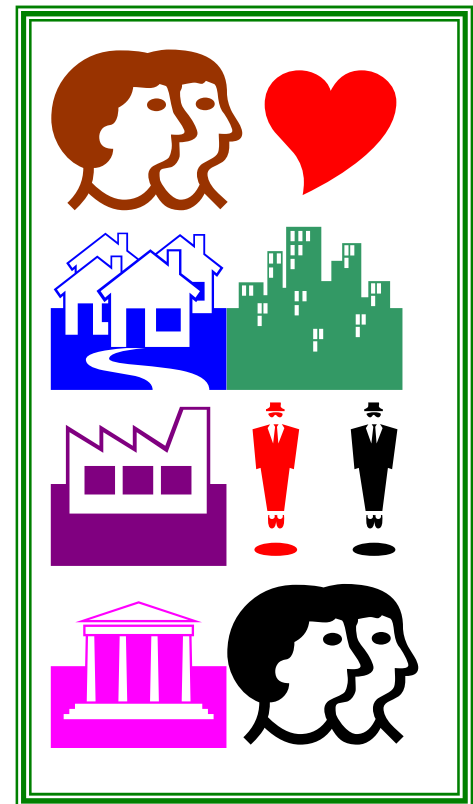
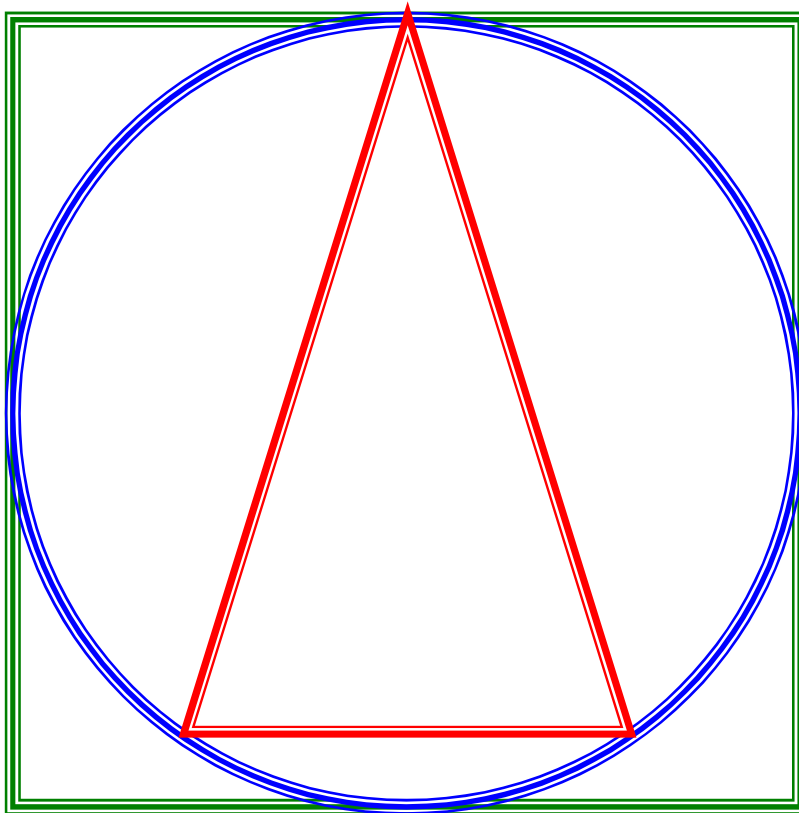
BY MEN AGAINST VIOLENCE AGAINST WOMEN.



Twenty-First Century

**A Proposed Joint Project by M.A.V.A.W. and
A Team of Selected Professionals.**

A Culture Of Peace



Directors: **Christopher Holder, CHAIRMAN.** **Donald Berment, SECRETARY.** **Desmond Persad, TREASURER.**
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
Yours In Nation Building.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



What Is The BSD Syndrome?

The **BSD Syndrome** is a local Trinidad and Tobago analytical concept for Domestic and other Violence, being developed by the NGO, "**Men Against Violence Against Women (MAVAW)**." (1994).

This concept utilizes the information, research and expertise already available for people working in the area of Violence Reduction, placing all that is presently being made use off, under the phenomenon of a **Syndrome**, identifying **BSD's** in a number of ways, briefly explained below.

Tons of work has already been done on: -

- **Belief System Deficits, (BSD)**
- **Behaviour Skill Deficits, (BSD)**
- **Biological System Deficits (BSD) and**
- **Baggage System Dependencies (BSD)** by practicing

Psychologists, Psychiatrists, Sociologists, Social Workers, Medical Internists, Building Biologists, Nutritionists, Interior Designers and Housing Specialists/Community Planners.

Unfortunately, rarely do more than one or two of these professionals; focus on the problem of Domestic Violence and/or Societal Violence, at any one point in time or in any single piece of literature, primarily because of academic learning structures and egotistical practices.

What the **BSD Syndrome** will do, is to pool all the relevant data together under a **Syndrome** and spread the gospel of a Holistic approach to solving Violence Problems. In the **BSD Syndrome**, you will realize that violence in relationships is a paradoxical issue. Characteristics identified as BSD's in "**abusive outwards behaviour**", is complemented and also considered "**abusive acceptance behaviour**", recording the paradoxical fact that both parties in a relationship have BSD's.

It is therefore, a philosophical and scientific way to moves from the individual discipline solutions to a multi-discipline solution and depends on the acceptance of the **concept** that no one discipline has the answer for a situation where recurring violent behaviour have a variety of influencing elements.

Consequently, a model of the four (4) main characteristics within the **syndrome** can be used for research, analysis and diagnostic purposes. In addition, programmes for development in the four areas identified above, can be designed to replace the existing unsuitable ones, which in the main, contribute to polarizing the sexes, using inflammatory language, limiting the healing process.

A lot of research has already been collected for editing, prior to the preparation of a multi-authored text titled "**Roots of Societal Violence—Understanding the BSD Syndrome**". A few professionals have already been approached to be part of this ambitious project and in due course, some of the challenging logistics will be hammered into place. The days of using "Batterer", "Victim", "Perpetrators" in violence analysis, are numbered in the minority.

A letter to the Webmaster of the most powerful "male issues" website, Bert Hoff is appended to this explanation for further clarification and description of our work as **MAVAW**.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.

To: berthoff@comcast.net.

REPLY TO BERT HOFF

Date: **Wed/15/Oct/03**

From: mavawsec@yahoo.com

Hello Bert,

Please accept my sincere thank you, for your quick response and frank comments to/on my Email "Men Against Violence Against Women". Let me also acknowledge here my deep appreciation for your work in maintaining "**Men Web**" and David Troops' efforts in **The Men's' Issues opus**. These resources will forever be a tremendous help to all men working on issues which affect men, be it abuse to them, from them, to and from their loved ones and to the environment. Another site to note is www.menagainstviolence.com. The other Email to you, mentioned November 19th, the annual celebration, locally and in the Caribbean of "**International Men's Day**". My wish is that you hold no objection to this celebration and spread the word to the best of your ability.

The philosophy underpinning reduction and elimination of unacceptable violence, in my view, must accept different methodologies, presentation styles and degrees of healing by the persons involved; all based on their personal levels of emotional, physical and spiritual maturity.

Many men, on first hearing about MAVAW and reading our documents, get the impression that we do not realize the full extent of abuse to men or support them to the same degree, as we do women. A closer perusal of our Formal Documents and our History will show quite the opposite.

For the past five years **MAVAW (Men Against Violence Against Women)** has been operating a 24-hour HOTLINE 1-868-637-0924 with mailbox and cell phone 1-868-753-0804, so that we can testify to the pain and suffering of both men and women experiencing violence in their relationships. Our members sat on the Cabinet appointed Committee, which reviewed our Domestic Violence Legislation. MAVAW men now sit on the Cabinet appointed Committee, which is analyzing the Status of the Family in Trinidad and Tobago. Our Crime Statistics predominantly record offences by violent young males, a serious concern to us as men, fathers, uncles, brothers, nephews, grandfathers and adults. At last count, 5,494 men were incarcerated in our Prison system and 216 women. A fact we aggressively requested to be noted by the formulators of the first National Gender Policy. As our Documents state "**We Want Change Not Exchange**"

Every Judge, Master of the High Court, Justice of the Peace, Magistrate, Library, Parliamentarian, Calypsonian, Media House and many NGO's to name a few have a copy of our **2002 Domestic Violence Awareness Handbook**. On every occasion possible and there is a very interactive media component here; we challenge men and women on their gender insensitive statements. MAVAW coordinated a 13-week radio programme titled "Talking Gender" emphasizing how both men and women are affected equally by violence in relationships.

At present there are five very important projects, which are getting the support of Men Against Violence Against Women: -

1. Publication of a textbook by member Dr. Russell Foote, "Roots Of Youth Aggression: Home, School and Multilevel Interventions",
2. International Men's Day by friend and supporter of MAVAW PhD candidate Jerome Teelucksingh.
3. "Men's TV" a one hour television programme for men, hosted by member Dr. Robert Moultrie, with half hour interviews and half hour public interaction.
4. The **BSD Syndrome Concept**, our most important and "people issue" to date (explained below in part, which in my view is the future of Domestic Violence analysis and discussion).
5. A Bumper Sticker Programme, utilizing our most poignant "One Liners.

This **Syndrome** will eliminate the terms now used in the **Violence In Relationships Arena**, terms like **victim, batterer, perpetrator, domestic violence** etc. Within the **BSD Syndrome**, you will understand that Violence In Relationships is a paradoxical issue...Characteristics, which have already been well documented elsewhere, now come together under the umbrella of a Syndrome, and paradoxically, what is considered abusive as “outwards behaviour” is complemented and also considered abusive as “acceptance behaviour”, recording the fact that both parties in the relationship have BSD’s. These Characteristics can be explained under 4 Heads, which time and space allows for brief mention here: -

1. Belief System Deficit (BSD)
2. Behaviour Skill Deficit (BSD)
3. Baggage System Dependency (BSD)
4. Biological System Deficit (BSD) and these are the negative components in the Syndrome. The positive action within the Syndrome also termed BSD’s, but refer to methodologies utilized to accomplish Development: -
5. Belief System Development.
6. Behaviour Skill Development
7. Baggage System Development and
8. Biological System Development.

This concept scientifically places the Violence In Relationships Issue, into a medium that takes away the stigma and **gender polarizing** associated with its treatment in the past. We anticipate resistance to this concept by some women, primarily because every statistic, which lists one person being hurt, will also have to list the other person causing the pain, as being hurt too. A lot of women will find that hard to accept, but we hope that in few years time this will change.

In the past MAVAW actively co-hosted **Male Awareness Week** in December, **Fathers’ Week** in June and fully support the entire Women’s Days here. In Canada during the year 2000, we were actively involved with planning the first **Dad Walk** by the White Ribbon Campaign. This year they celebrated their 4th **Dad Walk** on the 15th June at the Toronto Zoo. <http://www.whiteribbon.com>. We were also instrumental in changing one Canadian Government programme from “**Male Batterers Programme**” to “**Spousal Abuse Programme**”. In Suriname during November 2002, one of the feminist’s organisations there, which has progressed to the “people issue” stage, **Foundation Stop Violence Against Women, Director Tienke Sumter**, Email stopgeweld@sr.net, invited us to participate in a 3-day conference and provide a 4-day training programme for their NGO Sector in the following areas: -

- | | |
|---------------------------------|---|
| 1. Domestic Violence Awareness. | 2. Parenting |
| 3. Healthy Relationships. | 4. Domestic Violence and Interior Design. |

The conference Theme was “**Development= Change: From Women Counseling To System Oriented Counseling**” and my presentation was titled “The Role Of Men Against Violence Against Women”. Let me acknowledge that it was at a training session with the top managers of this forward looking feminist group that the BSD Syndrome was fine-tuned with their contribution, from just noting the “baggage” as a characteristic to the “Baggage System Dependency”.

What we firmly believe however is that we as men must take responsibility for male violence and do all in our power to reduce and eventually eliminate it from our society (**Violence by men against men, women, children and the environment**). If women choose to do or not do the same, they will bear the consequences of their action. We are **men not God**, so judgment is not ours to pass

Please keep in touch Bert and forgive this long Email.

Donald Berment, Secretary MAVAW



Men Against Violence Against Women

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Email: mavawsec@yahoo.com. Website: <http://www.mavaw.com>



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Thursday 11th November 2004 **Our Ref.:** mavaw/PDW-ja-1

Your Ref:

**Mr. Peter Douglas Weller, PhD,
Clinical Psychologist,
University Counseling Service,
University of the West Indies, Mona,
11 Gibraltar Camp Road,
Kingston 7,
JAMAICA.**

**SUBJECT: CARIBBEAN MEN'S
GROUPS AND BATTERER'S
INTERVENTIONS.**

Hello Peter,

Thank you for your kind attention and invitation to contribute to this new **Men's Group** in Jamaica and your Report preparation for UNIFEM's review meeting in December 2004. Men of **MAVAW** are always extremely excited to participate in the growth and development of "**The Men's Movement**," which commenced over 50 years ago Internationally, fuelled by the example of the most holistic Gender Sensitive man known to date, **Jesus Christ**.

The **Men's Groups** known by us in the Caribbean are: -

Trinidad and Tobago—ARTOM (The Association For The Reorientation And Transformation Of Masculinity)—Men (Men's Enlightened Network) not active and of course us.

Jamaica—Father's Incorporated.

Barbados—National Men's Fellowships Association.

St. Lucia—The Mother's and Father's Union.

Belize—Brothers of BOWAND.

Suriname—ManmitMan.

Guyana—Men Against Violence Against Women.

Trinidad **MAVAW** sat on the Cabinet Appointed Committee to review our Domestic Violence Legislation, Act No 10 of 1991 to our new Act No 27 Of 1999. We also sat on the just completed Cabinet Appointed Committee to examine the Institution of the Family in Trinidad and Tobago.

What has resonated to a high degree in these deliberations, both over 12 months duration, is the need to reconsider the Terminology used in the "**Violence Reduction Movement**" and attempt to truncate the Gender and other polarization consequences, which accrue from words like "**Batterer**," **Victim**," "**Perpetrator**," etc.

It is now accepted Internationally, that dysfunctional behaviour in Democratic Societies, has been researched, presented and documented individually by disciplines within the Medical, Social, Food and Building Sciences. Psychologists (like yourself) Psychiatrists, Internists, Nutritionists, Building Biologists, Interior Designers & Decorators and Housing Specialists (like me), have already recorded/accumulated a tremendous amount of research/experience in their respective disciplines.

Unfortunately, this valuable effort is only utilised individually in order to strategize for **Violence Reduction** in societies, which in my view has allowed the creation of a **Peaceful Culture** to elude us to date.

Over the past 2 years, Trinidad and Tobago's, **Men Against Violence Against Women** has been presenting this accumulated effort as a means to face "Head On" the Roots of Societal Violence. We call it **The BSD Syndrome**, which gives due respect to the work already done in the individual disciplines listed above, providing a path for a Unified Approach to **Violence Reduction**, eliminating the Terminology that has been the source of polarization, replacing it with **Belief System Deficit and Development, Behaviour Skill Deficit and Development, Baggage System Dependency and Development and Biological System Deficit and Development, or for short "A BSD"**

Although, **The BSD Syndrome** is a simple solution of Structure, it will require the input of all the relevant professionals, in order to present the final work in Book form for dissemination to the public. The presentation for the Academic Community is about ¾% complete, funding a major concern. Sadly, men working in this arena do not obtain adequate funds to do what is necessary. We were offered coffee, juice and finger-food on those Cabinet Appointed Committees mentioned above, not even free Internet Access to our Community Based North West Location to do Caribbean and International Collaborations, like this. Not to be daunted by this reality however, Peter, it will be fantastic if I can get you to be excited about this eclectic Syndrome as I am and interest you in providing a Chapter in the proposed Book, suggested Title **"Roots Of Societal Violence—A Male Perspective: Understanding The BSD Syndrome"**.

With respect to the Intervention Programmes you are interested in, there is not much to offer locally or in the Caribbean, which originates from the Judiciary. Brief mention is made of Counseling Programmes in our Domestic Violence Legislation and we have a new Family Court System that depends heavily on Counselling and Mediation.

We also have active NGO's, 1,630 registered at last count, in 15 Municipal Regions and a Ministry of Community Development and Gender Affairs, which over the past five years, have been seriously attempting to educate both men and women on the concepts of Gender and Gender in Development. The financial commitment to this work is however heavily skewed to the female component of the Gender Arena. In our last Budget, 2004-2005, the sum of \$9.7M TT was allocated for several women development projects and \$160,000 TT for one male development project, in spite of the glaring statistics of young male crime, deaths, suicides and poor school attendance.

However, I spent 5 months in Canada (November 1999 to April 2000) completing a self-funded Development Research Project, using the REM (Ripple Effect Model), titled **"Violence Reduction Strategies in a Large Multicultural, Racially/Tribally Diverse Country—Using the RET Model"**. Funds were not and still are not available to present this work for academic scrutiny. But in Canada, you will find NGO, State and Judicial Intervention Programmes, many of which target the male population.

The List of Websites below provides valuable material, for both pro-feminist and pro-masculine research:

www.xyonline.net www.michaelkaufman.com www.endabuse.org/bpi www.mavaw.com
www.web.net/womensHRights www.menweb.org www.sheridanhill.com/Batteredmen.html
www.csulb.edu/~mfiebert/assault.htm www.resourcesforfathers.or www.menshealthnetwork.org
www.menstudies.com/links.htm www.achillesheel.freeuk.com/index.html www.profeminist.org
www.cyfc.umn.edu/Fathernet www.unicef.org/reseval/malsr.htm.

Best of luck with your future work and I welcome further discussion on the project and the development of a coordinated and collaborative Caribbean approach in both areas. Please remember the movement for Terminological Changes. Our website (under construction listed above) will give you more information.

Signed DONALD BERMENT Secretary MAVAW.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators: David Law, Johnny Bharath,

P.O.R.O.



REPUBLIC OF TRINIDAD AND TOBAGO

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DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Sat/8th/Oct/05

Our Ref.: mavaw/BM-uwicc

Your Ref:

Professor Ramesh Deosaran,
Head,
Centre for Criminology and Criminal Justice,
University of the West Indies,
St. Augustine Campus.

SUBJECT: UPCOMING BREAKFAST MEETING AND SEMINAR ON VICTIMS' RIGHTS

Dear Professor,

Thank you for the invitation to the Breakfast Meeting on Sat/15/Oct/05 at the Crowne Plaza Hotel and the Notice of the Seminar on "Victims' Rights and Welfare" on Sat/12/Nov/05 at the LRC, UWI.

Over the years my research as a Housing Specialist has highlighted two important facts: -

1. That criminal behaviour has an inherent paradoxical nature and therefore must be analyzed with a suitable model and
2. There must be a collaborative and cohesive thrust in the intelligence gathering aspect of crime prevention that has to rely on "close to the ground" support, with well managed communication strategies, as opposed to high level and International assistance.

As part of my contribution to MAVAW, attempts are being made to develop "The BSD Syndrome" both as a scientific treatment of Domestic Violence and as a Model for analyzing its occurrence in families.

The volume and scope of this attempt requires resources unavailable to me and MAVAW at the present time but the concept has been introduced to the local and International NGO community a few years ago. On our developing Website the Folder "The BSD Syndrome" can provide some insight into my attempt.

An unbiased review of the nearest thing we have to "close to the ground" intelligence gathering i.e. "The Crime Stoppers Programme", will reveal that there are reports the Police have not attended to as yet although the activity reported is ongoing. This is not the forum to lay the foundation for Item 2 above.

In the Folder "Books", "Gender" same site a copy of the Draft Gender Policy is available for first reading.

Our Chairman Christopher Holder recently completed his M.Sc at your Centre in the "Sociology of Crime and will be interested in offering his views. I am interested in doing Law next year, wish me luck.

Our sincere thanks again for your kind invitation, which I will try to attend.

Signed DONALD BERMENT Secretary MAVAW.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators: David Law, Johnny Bharath.

P.O.R.O.



The Roots of Societal
Violence



UNDERSTANDING THE BSD SYNDROME

Compiled By Donald D. Berment, Secretary,
Men Against Violence Against Women (MAVAW)

WITH INDIVIDUAL CHAPTERS BY:

Psychologist,.....
Psychiatrist,.....
Internist,.....
Nutritionist,.....
Building Biologist,.....
Interior Designer,.....
Housing Specialist,.....



SYNDROME:

Condition. Disease. Pattern. Set Of Symptoms. Disorder.

CONDITION: (state [n]) (Stipulation [n]) Acclimatize [v])
 State. Form. Situation. Circumstance. Order.

DISEASE:

Illness. Sickness. Ailment. Disorder. Virus. Infection. Syndrome. Malady.
 Bug. Complaint. (*Good Health [Antonym]*).

PATTERN:

Prototype. Outline. Model. Example. Blueprint. Guide. Mold. Sample.
 Precedent. Archetype.

SYMPTOM:

Indication. Sign. Warning Sign. Indicator.

DISORDER:

Chaos. Disarray. Confusion. Mess. Muddle. Turmoil. Anarchy. Mayhem.
 Bedlam. Unrest. (*Order [Antonym]*)

BELIEF: (Faith [n]) Confidence [n]).

Faith. Conviction. Confidence. Principle. Idea.

BEHAVIOUR: (Performance [n]).

Performance. Actions. Deeds. Activities. Manners. Conduct.

BAGGAGE: (*Luggage [n]*).

Luggage. Bags. Suitcases. Cases. Belongings. Personal Belongings. Hand Baggage.

BIOLOGICAL:

	<i>Organic [adj.]</i>	<i>Natal [adj.]</i>
Organic.	Natural.	Birth.
Natal.	Whole.	Genetic.
Life.	Unrefined.	True.
	Untreated.	Biological.
	Crude.	Natural.
	Macrobiotic.	

BELIEFS—BEHAVIOUR—BAGGAGE

The Psychologist--The Social Worker--The Counsellor.

**BIOLOGICAL
FACTORS.**

HUMAN BIOLOGICAL

The Psychiatrist--The Internist--The Nutritionist.

BUILDING BIOLOGICAL

The Building Biologist--The Interior Designer and Decorator--The Housing Specialist.

Toxic Shock Syndrome

Toxic Shock Syndrome (TSS), rare disease associated with strains of the bacterium *Staphylococcus aureus*, a common inhabitant of the skin, oral cavity, and vagina. Under certain conditions the bacterium produces a toxin that apparently attacks the immune system through the bloodstream, in turn permitting more toxin to be produced. Liver function is also altered, resulting in liver and kidney damage. Symptoms of TSS include rash, high fever, lowered blood pressure, diarrhea, and vomiting. TSS has caused death in about 3 percent of reported cases. The disease can be treated with antibiotics.

The first identifiable case of TSS dates back many years, but the disease only drew great attention in the United States in the late 1970s, when an outbreak led to fears of an epidemic. A few thousand victims were eventually involved, about 80 percent of whom were menstruating women. Almost all of them were using superabsorbent tampons, which apparently provided a more oxygen-rich atmosphere in which vaginal bacteria could readily produce their toxin. When women began to use such tampons only intermittently or not at all, the outbreak subsided.

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Tourette's Syndrome

Tourette's syndrome, neurological disorder characterized by involuntary body movements and vocal, sometimes obscene, outbursts. A rare disorder, it is named after a French physician, Georges Gilles de la Tourette, who first described it in 1885. The syndrome commonly appears in childhood—more often in males than females—and may worsen thereafter; the cause is unknown. No cure yet exists, but symptoms are often treatable with tranquilizers.

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Sudden Infant Death Syndrome

Sudden Infant Death Syndrome (SIDS), also called crib or cot death, the unexplained sudden death, usually during sleep, of an apparently healthy infant. In the United States, SIDS is the third leading cause of death in infants between 1 month and 12 months of age. It primarily strikes children one to six months old—57 percent of SIDS victims are two to four months old and 95 percent are less than six months old. Since 1989, when more than 5,600 infants died of SIDS, the number of cases has decreased steadily in the United States. In 1998 about 2,800 infants died

of SIDS . About 60 percent of infants who die of SIDS are males. Native American and African American infants are at highest risk.

Studies show an association between SIDS and one or more risk factors. SIDS is more common in infants with low birth weights—those weighing 2.5 kg (5.5 lb) or less at birth. SIDS is more common in infants whose mothers are under 20 years old, unmarried, have had inadequate prenatal care, did not breast-feed the infant, or have more than one infant. There is a higher incidence of SIDS among infants whose mothers smoked during pregnancy or after birth. Risk also increases in households where the father or another family member smoked—research indicates that infants exposed to cigarette smoke only after birth are twice as likely to die of SIDS. Use of illegal drugs during pregnancy is another major risk factor.

Despite the various risk factors, the cause of SIDS remains unknown. Many researchers suggest that infants who die of SIDS are born with undetected conditions that make them more vulnerable to physical and environmental stresses. Most theories about the actual cause of death focus on difficulties with breathing. Insufficient exchange of oxygen and carbon dioxide in the lungs may be caused by blockage of the air passages, faulty breathing reflexes, or problems with the brain's regulation of breathing. Abnormal heart rates or rhythms may also be involved in these deaths. A 1998 study by researchers in Italy showed that babies who have a heartbeat abnormality known as long Q-T syndrome are 41 times as likely to die of SIDS as babies with normal heartbeats. Other possible contributing factors include poor muscle tone and unstable body temperature.

In cases of sudden, unexpected infant deaths, SIDS is listed as the cause of death only after all other possible causes are eliminated including brain defects, heart disease, acute (sudden) illness like meningitis, or child abuse. A thorough examination of the infant, including a complete autopsy, examination of the infant's sleeping environment, and review of the medical history of both the victim and parents, is conducted in all suspected SIDS cases.

While the cause of SIDS remains unknown, recent advances in prevention have targeted significant risk factors. In 1992 the American Academy of Pediatrics (AAP) recommended that infants be placed on their backs to sleep. One study found that since this recommendation was made public, the rate of SIDS decreased by 38 percent in the United States between 1992 and 1996. This AAP recommendation is for healthy infants only. A physician may suggest another sleeping position if an infant has a condition that affects breathing or swallowing.

An infant's crib should be furnished with a firm mattress that fits snugly against the crib's sides. Infants sleeping facedown on soft surfaces such as water beds, beanbags, or pillows, may form a hollow pocket near the face on the sleeping surface. This pocket may cause infants to inhale their own carbon-dioxide-rich exhalations and suffocate from oxygen deprivation. Heavy bedding and soft stuffed animals that can trap air in the bed should also be avoided.

Research indicates that overheating from too much clothing, exceptionally warm bedding, or a hot room may significantly increase the risk of SIDS for an infant with a common cold or other infection. A constant indoor temperature of 20° to 21° C (68° to 70° F) will minimize overheating.

Breast-feeding appears to decrease the risk of SIDS, apparently because it helps prevent respiratory, gastric, and intestinal illnesses, infections, and certain immune disorders that may make infants more susceptible to SIDS. Eliminating smoking around the baby also decreases risk. A doctor may recommend the use of a heart and respiratory monitor for babies at high risk for SIDS. This machine sounds an alarm when the baby stops breathing or when the heart rate is too high or low. Infant caretakers are encouraged to learn cardiopulmonary resuscitation (CPR) in case an infant stops breathing (see Artificial Respiration).

SIDS is a devastating event for parents, who need support and reassurance for many months afterwards. SIDS support groups, comprised of other parents who have had similar experiences, can be particularly valuable.

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Reye's Syndrome

Reye's Syndrome, rare disease of young and teenage children that apparently occurs only after a viral infection. First described in 1963 by Australian pathologist and physician Douglas Reye, this noncontagious but dangerous disease has proven fatal in about one out of four cases. Its cause is unknown.

Symptoms of Reye's syndrome include a high fever, vomiting, liver abnormalities, and various displays of mental disorientation. Most importantly, cells in the patient's brain begin to swell. If this process goes untreated, it can lead to irreversible brain damage or to coma and death. Treatment of the brain swelling consists of relieving pressure inside the skull, if necessary by surgical techniques.

Progression of Reye's syndrome to a dangerous stage has been associated, to a statistically significant degree, with the administration of aspirin or other salicylates to children suffering from viral infections such as chicken pox and influenza. Aspirin manufacturers began placing warning labels to this effect on their products in the mid-1980s. Since that time, the incidence of the disease in the U.S. seems to have declined.

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Premenstrual Syndrome

Premenstrual Syndrome (PMS), disorder characterized by a variety of physical and emotional symptoms that occur in women before menstruation. These symptoms typically begin at or after ovulation (release of an egg by the ovaries), and continue until menstruation begins.

The most common physical symptom of PMS is fatigue. Other physical symptoms may include cravings for sweet or salty foods, abdominal bloating, weight gain, sore breasts, swollen feet or hands, headaches, acne, and various gastrointestinal problems. The emotional symptoms of PMS generally include depression, irritability, anxiety, or mood swings. Approximately 2 to 5 percent of women have severe PMS symptoms, but many have only mild or moderate symptoms. PMS is most common in women in their 20s and 30s, and ceases entirely at menopause.

Many researchers believe that PMS is the result of changes in estrogen and progesterone hormone levels that occur during the menstrual cycle. Among other effects these hormonal changes may cause the body to retain more sodium and fluid, leading to swelling or bloating. Recent research suggests that low levels of certain neurotransmitters (chemicals that transmit messages between cells) that affect a woman's sense of well-being and relaxation, and also stimulate the central nervous system may contribute to the emotional symptoms.

PMS is diagnosed by recording symptoms for several menstrual cycles. Symptoms that occur in a predictable pattern (starting before menstruation, then disappearing when it begins) usually indicate PMS. A doctor may perform a physical exam, if necessary, to rule out the possibility that symptoms indicate the presence of disease.

Treatment of PMS involves finding the remedy or combination of remedies that work for each individual. For some women, dietary changes, such as eliminating caffeine and alcohol, and cutting back on salt, will alleviate symptoms. Doctors often recommend vigorous, aerobic exercise because it is thought that exercise stimulates the body's release of various neurotransmitters, supplementing those that are at low levels.

Medications used to treat PMS include diuretics (to ease fluid retention), oral contraceptives (for hormone control), and anti-anxiety medication, for extreme irritability. Low doses of progesterone (a reproductive system hormone) have been used on an experimental basis. Researchers also have conducted experiments using drugs that affect neurotransmitter levels.

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Munchausen Syndrome

I INTRODUCTION

Munchausen Syndrome, mental illness in which a person intentionally deceives health-care professionals into believing he or she is ill. People with this disorder migrate from hospital to hospital, attempting to get admitted by continually faking or producing symptoms of illness. They embellish their medical histories with dramatic stories to attract attention, and they willingly undergo tests and treatments—even surgery—for contrived physical or psychological ailments.

The term “Munchausen’s syndrome” was coined in 1951 by British physician Richard Asher, who adapted it from the surname of Baron Münchhausen. The baron, a German cavalry officer in the 18th century, had acquired an erroneous reputation as a pathological liar who greatly exaggerated his adventures.

People with Munchausen syndrome intentionally mislead others about their health and assume the sick role typically because they want to be cared for and nurtured. In contrast, patients with *hypochondriasis* are preoccupied with illness because they misinterpret bodily sensations as evidence of serious disease (see Hypochondria). In *malinger*ing, people fabricate medical symptoms or illnesses in pursuit of specific external goals, such as qualification for disability payments or evasion of military service.

Munchausen syndrome represents the most extreme and chronic variant of a group of similar mental ailments called factitious disorders. Doctors diagnose factitious disorders in approximately 1 percent of hospital patients who receive psychiatric evaluations. Individuals with Munchausen syndrome tend to be men who are unmarried, unemployed, and estranged from their families.

II SYMPTOMS

People with Munchausen syndrome or other factitious disorders may claim medical symptoms in a variety of ways. These include (1) total fabrication, such as falsely claiming to be HIV-positive; (2) simulation, such as mimicking a seizure; (3) illness aggravation, such as manipulating a wound so it will not heal; and (4) illness induction, such as injecting oneself with bacteria to cause infection. The maladies may either be relatively common, or so esoteric that most physicians would have only a passing familiarity with them. The most frequently fabricated physical signs include anemia, rash, fever, and bleeding. Factitious psychological disorders, in which people fabricate emotional symptoms such as depression, are much less common.

In *Munchausen syndrome by proxy*, also called factitious disorder by proxy, one person (usually a parent) produces symptoms in another (usually his or her child) to experience the sick role vicariously. For example, a mother may induce vomiting or diarrhea in her child with over-the-counter drugs, then present the child for treatment while denying knowledge of the origin of the problem. The parent also may falsely report symptoms and alter laboratory data. Ailments commonly falsified or induced in Munchausen syndrome by proxy include seizures, apnea (cessation of breathing), vomiting, and fever.

III CAUSES

Many psychiatrists believe that Munchausen patients have suffered emotional neglect or deprivation in their past and that their “disease forgery” becomes a way of receiving attention and support. At the same time, people with this disorder combat a poor sense of self-identity by assuming the well-defined role of a sick person. Duping medical professionals also helps stifle feelings of weakness and vulnerability. A hypothesis that brain abnormalities cause Munchausen syndrome remains unproved.

IV TREATMENT

Patients diagnosed with Munchausen syndrome rarely consent to treatment of their disorder. Instead, when confronted with their ruse, they generally flee and continue their deceptions elsewhere. Nonconfrontational strategies, such as behavior modification, have been effective in selected cases. For motivated patients, psychotherapy can both enhance insight and provide the nurturance they once obtained through falsified illness. Medications such as antidepressants may be effective when the patients have additional mental illnesses. When addressing Munchausen syndrome by proxy, doctors focus on ensuring the ongoing safety of the child.

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Marfan Syndrome

Marfan Syndrome, rare inherited disorder of the supporting, or connective, tissues of the body, resulting in abnormalities of the eyes, lungs, heart, bones, and blood vessels. People with Marfan syndrome have a number of characteristic features, including unusually long, slender arms, legs, and fingers; nearsightedness; and the tendency for the lenses of the eye to be torn from their supports, or dislocated. Weaknesses in the blood vessels of Marfan patients often lead to severe problems of the heart and the largest artery in the body, the aorta. In Marfan patients, a weak aorta may stretch or form a bulge, called an aneurysm, in the vessel wall. During periods of physical activity, the resulting high blood pressure can cause the affected aorta to rupture and the patient may die.

Historically, people with Marfan syndrome died from complications of the heart or aorta by age 50. Today—with early diagnosis, heart monitoring, and proper medical treatment—Marfan patients live longer. The National Marfan Foundation estimates that at least 200,000 people in the United States are affected with the disorder.

Marfan syndrome is a genetic disorder that is passed from one generation to the next by a single, dominant gene. This means that a child who has one parent with the Marfan syndrome has a 50 percent chance of inheriting the disorder. In 1991 researchers identified the gene that they believe causes the syndrome. This gene is responsible for the production of *fibrillin*, a protein found in connective tissue that holds cells together. When this gene is defective, the connective tissue either does not contain enough fibrillin or contains an ineffective form of the protein. As a result, the connective tissues are weak and unable to tolerate normal stresses.

Doctors diagnose Marfan syndrome based on a physical examination of the bones and joints, an eye exam, and an echocardiogram, an ultrasound picture of the heart. They also take a complete family medical history to determine if the patient's relatives may have health problems that could be attributable to undiagnosed Marfan syndrome.

Because there is no cure for Marfan syndrome, treatment is aimed at minimizing the risk of injury to the heart and aorta. Treatment generally includes avoiding strenuous exercise; undergoing routine echocardiograms to monitor the size and function of the heart and aorta; taking medications that reduce the risk of injury to the aorta by lowering blood pressure; and, in rare cases, surgical replacement of the aorta.

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Klinefelter's Syndrome

Klinefelter's Syndrome, genetic disease affecting 1 in 850 males. It occurs when a male inherits an extra X, or female, sex chromosome that interferes with the development of male characteristics. Klinefelter's syndrome is characterized by enlarged breasts (gynecomastia), little or no facial and body hair, a small penis and testes, reduced sex drive, and the inability to produce sperm. Although a child with the condition is not developmentally disabled, he may learn to speak later than other children and have difficulty learning to read and write. The disorder was first described by American endocrinologist Harry F. Klinefelter in 1942.

Both men and women normally have 23 pairs of chromosomes. One of these pairs is the sex chromosome. A female normally inherits an X chromosome from each parent so that her chromosomal complement is XX. A male inherits an X chromosome from his mother and a Y chromosome from his father so that his chromosomal complement is XY. It is the presence of the Y chromosome that determines maleness. A male with Klinefelter's syndrome inherits an extra X chromosome, giving him an abnormal chromosomal complement of XXY. In some cases, more than one extra X chromosome is inherited. The cause of Klinefelter's syndrome is unknown, although it occurs slightly more often in boys born to older mothers.

In most cases, a boy with Klinefelter's syndrome has a normal physical appearance until he reaches puberty. Diagnosis of the disorder may be delayed until physical symptoms develop, or until the adult male is tested for infertility. Diagnosis of the disorder is made by performing a chromosomal analysis in which body cells are studied in the laboratory to identify any chromosomal irregularities.

There is no treatment for Klinefelter's syndrome, although regular injections of the male sex hormone testosterone may increase muscle size and strength, stimulate the growth of facial and body hair, and produce a normal sex drive in some cases. Enlarged breasts may be reduced surgically. Reversing infertility associated with Klinefelter's syndrome may not be possible. Some men with the disorder may produce a small number of sperm, and they may benefit from modern fertility techniques in which a single sperm is injected into an egg to achieve fertilization (see Infertility)

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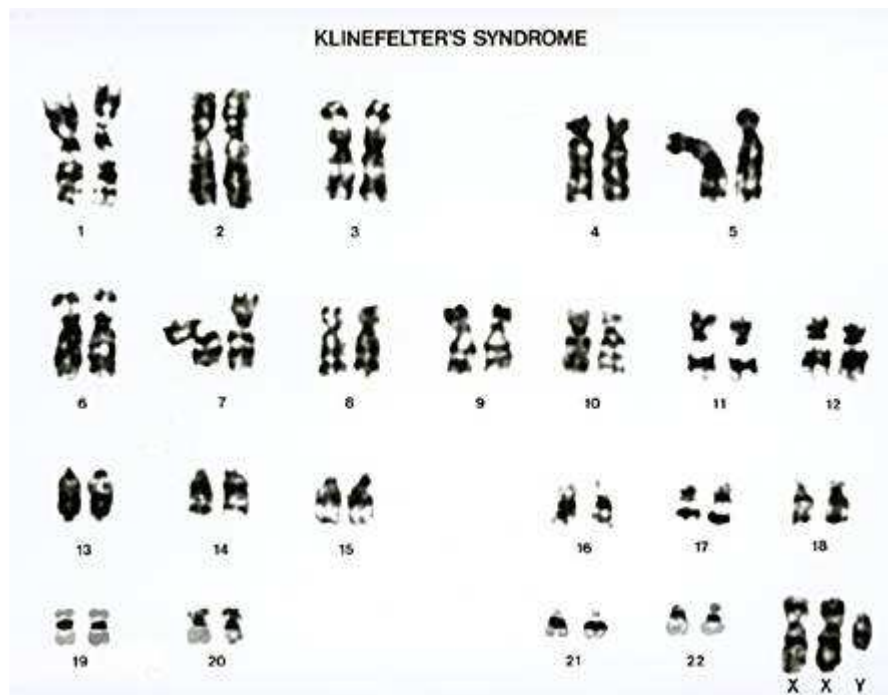


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Klinefelter's Syndrome Karyotype

This karyotype is indicative of Klinefelter's syndrome because it has three sex chromosomes—a single Y chromosome and two X chromosomes—instead of the usual two. People with Klinefelter's syndrome are always male. They are typically tall, and they may have slight breast development and small testes.

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Irritable Bowel Syndrome

Irritable Bowel Syndrome (IBS), also known as *spastic colon*, recurring symptoms of constipation, diarrhea, and abdominal cramping that appear without a clear cause. IBS accounts for 30 to 50 percent of patient visits to gastroenterologists (physicians who specialize in disorders of the intestinal tract).

The diarrhea associated with IBS is not true diarrhea in that there is no increase in stool volume. Patients sometimes pass mucus with the stools and have a sensation of incomplete evacuation of the bowels following defecation.

Recurring IBS has been associated with stress, although abdominal distress is a common reaction to anxiety in many people who do not suffer from IBS.

Physicians diagnose IBS only after conducting a series of tests that rule out other gastrointestinal disorders, such as inflammatory bowel disease, intestinal parasites, and polyps. These tests include a barium enema, stool parasite culture, and sigmoidoscopy, examination of the lower intestines with a hollow, tubelike instrument passed through the anus.

There is no cure for IBS and treatment focuses on alleviating symptoms. High fiber diets or antispasmodic drugs may relieve constipation, and antidiarrheal drugs may alleviate prolonged diarrhea. Although there is no scientific evidence linking irritable bowel syndrome and the amount of fiber in the diet, some people benefit from eating a high-fiber diet, while others find reducing their carbohydrate intake helps.

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Gulf War Syndrome

I INTRODUCTION

Gulf War Syndrome, collective group of medical ailments reported by veterans who served in the 1991 Persian Gulf War. The term *Gulf War syndrome* emerged in the years following the war, when up to 100,000 of the 697,000 United States troops who had served in the Persian Gulf came to Veterans Affairs (VA) Medical Centers with complaints of mysterious ailments they attributed to their wartime service. About 85 percent of these veterans were diagnosed with known illnesses, including connective tissue disorders and chronic fatigue syndrome. For the remaining 15 percent, however, VA doctors have been unable to provide either a definitive diagnosis or an effective therapy. The majority of those with Gulf War syndrome are United States veterans, but similar complaints have been reported by veterans from other countries, such as Britain and Canada, who fought in the Persian Gulf War.

II SYMPTOMS

Veterans with the syndrome suffer from various combinations of symptoms in 12 categories: fatigue, skin problems, muscle pain, joint pain, neurological problems, psychological problems, respiratory system problems, sleep disorders, gastrointestinal problems, heart problems, abnormal weight loss, and menstrual problems. Studies using magnetic resonance imaging have found that some seriously ill veterans have significantly lower levels of the brain chemical N-acetyl-aspartate, indicating damage to the parts of the brain that control reflexes, movement, memory, and emotion.

III CAUSES

Researchers do not agree on a specific cause for Gulf War syndrome. A majority now think that the syndrome is a consequence of exposure to a variety of chemicals, including smoke from burning oil wells, pesticides, anti-nerve-gas agents, and chemical and biological warfare agents. This conclusion is bolstered by laboratory studies showing that chickens exposed to at least one combination of the various chemicals that Gulf War veterans encountered can develop symptoms resembling

those of Gulf War syndrome. Some researchers believe that stress may be the primary cause of the syndrome.

The chemical warfare agents implicated in Gulf War syndrome are nerve gases, such as the organophosphate gas called sarin, which kills by disabling the central nervous system. Biological warfare agents may also have been used in the Gulf War—examples are the lethal bacteria that cause anthrax and botulism. Iraq is known to have accumulated large stores of both chemical and biological agents before the war, and as many as 100,000 troops were exposed to low levels of nerve gases when weapons containing them were destroyed at the Khumaysah complex in southern Iraq.

The various military forces taking part in the war were themselves sources of chemicals that may have harmed veterans. For example, U.S. troops were exposed to the delousing agent lindane and to the pesticides DEET and permethrin, which were used to shield them against insects. In addition, U.S. soldiers were inoculated with an experimental drug called pyridostigmine bromide to help protect them against nerve gases. Some British troops were housed in tents that had been heavily sprayed with organophosphates, chemicals intended to kill insects but which may cause nerve damage in humans.

IV CONTROVERSY

The U.S. government has been slow to acknowledge that soldiers were exposed to chemical warfare agents or that Gulf War syndrome exists. Military officials at first denied that any soldiers had been exposed to chemical warfare agents, but in 1995 they conceded that 5,000 soldiers might have been exposed at the Khumaysah weapons site. Over the next two years, that estimate was gradually increased to 100,000. Initial studies by VA physicians also found no evidence that Gulf War soldiers suffered any unusual disorders. Nevertheless, two 1996 studies—one by the U.S. Centers for Disease Control and Prevention (CDC), the other by the U.S. Navy—concluded that the phenomenon was real. A 1997 investigation by the General Accounting Office confirmed the findings of the 1996 studies. That report also criticized earlier investigations by the military and a special White House panel, charging that those groups did not want to find evidence that exposure to chemical agents may be a cause of the illness.

Today most authorities agree that the syndrome is real. A 1999 report underwritten by the U.S. Department of Defense concluded that pyridostigmine bromide may be responsible for the many unexplained illnesses associated with Gulf War syndrome. As a result of this report, a number of government-sponsored laboratories have initiated additional studies into the drug's effects. The government has expanded its research panel on the syndrome from 12 members to 110 and is more actively searching for both causes and treatments. Meanwhile, Gulf War veterans whose illnesses began within ten years of the war are eligible for full medical benefits.

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Guillain-Barré Syndrome

Guillain-Barré Syndrome, relatively rare disease of unknown cause affecting the peripheral nervous system, especially the ventral roots of the spinal cord, and characterized by a flaccid paralysis. This condition can strike at any age, and both sexes are equally prone to the disorder. In the United States, this rare syndrome affects about one person in 100,000. Onset of the disease frequently follows a mild respiratory or gastrointestinal infection by one to three weeks, indicating that an autoimmune response of some kind may be involved.

Early symptoms include fever, malaise, nausea, and muscular weakness. The paralysis that follows is usually accompanied by sensations of tingling and numbness. The disease may reach an acute phase during which mechanical ventilation is required to avoid respiratory failure.

No specific treatment is known. Improvement begins spontaneously; recovery usually takes place within a few weeks or months. With proper care, mortality is less than 5 percent, and the prognosis for complete recovery is good.

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Fetal Alcohol Syndrome

I INTRODUCTION

Fetal Alcohol Syndrome (FAS), mild to severe mental and physical damage to the fetus (the unborn child in the mother's uterus) caused by the mother's use of alcohol during pregnancy. FAS affects about 1 to 3 in every 1,000 live births worldwide, and is the leading known cause of mental retardation in the Western world. French researchers at the University of Nantes in 1968 were the first to make a connection between maternal use of alcohol during pregnancy and birth defects in children. Five years later, American geneticists at the University of Washington in Seattle termed this condition fetal alcohol syndrome.

Children with FAS are small in size and weight at birth and have slow growth rates throughout their development. A child with FAS has characteristic facial features that may include short eye slits, a flattened midface, a smooth and elongated space between the nose and mouth, and a narrow upper lip. Children diagnosed with FAS

show evidence of damage to the central nervous system that may be in the form of mental retardation, learning disabilities, developmental disabilities, seizures, or small head size. A child with FAS may develop visual and hearing problems, heart defects and other physical problems, and behavioral problems.

Researchers have found that some individuals who were exposed to alcohol during fetal development show only some of the characteristics of FAS. These individuals are described as having fetal alcohol effects (FAE). However, both FAS and FAE individuals may have some degree of brain damage.

II HOW ALCOHOL AFFECTS THE FETUS

Researchers have proven that alcohol is toxic to the fetus, although exactly how alcohol causes damage is not fully understood. Alcohol can harm fetal cells. It also affects the placenta, the organ through which the fetus absorbs oxygen and nutrients from the mother, reducing the blood flow to the fetus and causing a severe shortage of oxygen.

The extent to which a fetus is damaged by exposure to alcohol depends on when the mother consumed alcohol during her pregnancy, and how much alcohol she consumed, among other factors. Studies of pregnant animals that were fed alcohol have led researchers to conclude that major physical defects in the human embryo, the early developing organism, can be caused by exposure to alcohol in the first trimester—that is, the first three months of pregnancy. Decreased fetal growth is associated with exposure to alcohol in the third trimester. Brain damage can result from exposure of the fetus to alcohol at any point during the pregnancy.

Researchers know that the more alcohol the mother drinks and the longer the fetus is exposed to the mother's alcohol consumption, the more severe will be the child's birth defects. Binge drinking, or heavy alcohol consumption at one sitting, is particularly hazardous to the fetus, because very high levels of alcohol enter the mother's blood stream, and the alcohol is passed into the blood of the fetus through the placenta.

The United States surgeon general recommends that women stop drinking alcohol entirely during pregnancy. Women who are trying to become pregnant, or who suspect they are pregnant, are urged to stop using alcohol in order not to damage the developing embryo.

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Down Syndrome

Down Syndrome, chromosomal disorder that results in mild to severe learning disabilities and physical symptoms that include a small skull, extra folds of skin under the eyes, and a flattened nose bridge. Muscle tone throughout the body is usually low. The condition was formerly known as “mongolism” because the features of people with Down syndrome were thought to resemble those of Mongolian Asians. This term is now considered offensive and inappropriate and is no longer used.

Down syndrome occurs in about 1 out of every 800 births worldwide. In the United States each year, about 1,600 babies are born with this condition. Down syndrome results when a person inherits all or part of an extra copy of chromosome 21. This can occur in a variety of ways, the causes of which are unknown. The most common chromosomal abnormality that produces Down syndrome (accounting for about 95 percent of all cases) is Trisomy 21, a defect in which an extra, third copy of chromosome 21 is present in every cell in the body. The risk of Trisomy 21 is directly related to the age of the mother. The number of Down syndrome births is relatively low for 18-year-old mothers—about 1 in 2,100 births. In the later childbearing years the risk increases significantly—from 1 in 1,000 births for 30-year-old women to 1 in 100 births for 40-year-old women.

Two other chromosomal abnormalities cause Down syndrome and occur in about 2 to 3 percent of all cases. The first, translocation, takes place when a child inherits a small, extra piece of the 21st chromosome that is attached to another chromosome. If, in addition to the translocation, two normal 21st chromosomes are also present, the person will have some of the features of Down syndrome. If there is only one normal 21st chromosome, the person will not display symptoms but the children may inherit Down syndrome. Mosaic Down syndrome results from a second type of chromosomal abnormality in which only some cells in the body have an extra chromosome.

There is no cure for Down syndrome. However, prenatal tests are available to identify fetuses with the disorder. The American College of Obstetricians and Gynecologists recommends that the so-called triple-screen blood test be offered to all pregnant women. This test measures the levels of three chemicals in the blood of the pregnant woman to indicate the baby's risk of Down syndrome. If the risk is high, amniocentesis, a procedure for removing a sample of the amniotic fluid surrounding the fetus, is administered to confirm the findings from the blood tests. Fetal cells are present in the amniotic fluid and can be checked for the presence of the chromosomal disorder.

People with Down syndrome are subject to a variety of medical conditions. Heart abnormalities that may require surgery are present in about half of all Down syndrome cases. Thyroid problems (underproduction or overproduction of thyroid hormones) affect 10 to 20 percent of people with Down syndrome, but these

problems respond well to treatment. The risk of acute leukemia is somewhat increased, although treatment is successful in the majority of cases.

There have been dramatic increases in the survival rates of people with Down syndrome since the 1970s. As the risks of medical problems specific to Down syndrome have become known, doctors are now able to recognize those problems earlier, and develop more effective treatments. Today, 44 percent of people with Down syndrome survive to age 60, and this life expectancy is slowly approaching that of people without Down syndrome.

Although people with Down syndrome have a range of learning disabilities, physicians, educators, and parents now recognize that these people's achievements may be most influenced by what is expected of them. This so-called environmental expectation is perhaps the most important factor in determining the educational and vocational potential of people with Down syndrome. On the other hand, intelligence-quotient test scores, once considered an authoritative indicator of educational potential, are now seen to be of questionable value.

Educational and vocational opportunities have also advanced. In the recent past, children with Down syndrome were relegated to institutions, receiving minimal social interaction or educational opportunities. Today, children with Down syndrome usually remain with their families and are enrolled in public schools. Often they attend regular classes and learn skills such as reading and writing alongside children without Down syndrome. Adults with Down syndrome are employed in a range of fields. Some may live in supervised group homes, while others live independently.

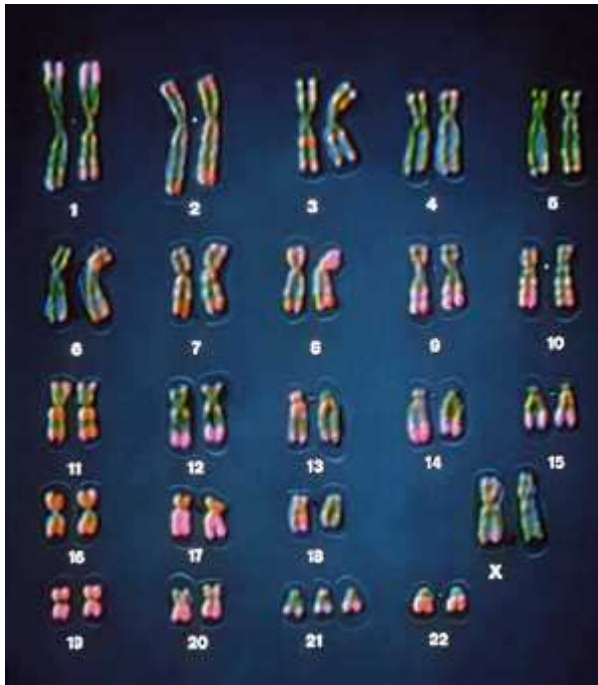
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Phil Mattheis

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Down Syndrome - Trisomy 21

Normally a fertilized egg possesses only two copies of each chromosome. Down syndrome is a chromosomal disorder in which, in some cases, there are three copies of the 21st chromosome, a defect known as Trisomy 21. Down syndrome causes certain learning disabilities and physical symptoms.

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Guillain-Barré Syndrome

Guillain-Barré Syndrome, relatively rare disease of unknown cause affecting the peripheral nervous system, especially the ventral roots of the spinal cord, and characterized by a flaccid paralysis. This condition can strike at any age, and both sexes are equally prone to the disorder. In the United States, this rare syndrome affects about one person in 100,000. Onset of the disease frequently follows a mild respiratory or gastrointestinal infection by one to three weeks, indicating that an autoimmune response of some kind may be involved.

Early symptoms include fever, malaise, nausea, and muscular weakness. The paralysis that follows is usually accompanied by sensations of tingling and numbness. The disease may reach an acute phase during which mechanical ventilation is required to avoid respiratory failure.

No specific treatment is known. Improvement begins spontaneously; recovery usually takes place within a few weeks or months. With proper care, mortality is less than 5 percent, and the prognosis for complete recovery is good.

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Fetal Alcohol Syndrome

I INTRODUCTION

Fetal Alcohol Syndrome (FAS), mild to severe mental and physical damage to the fetus (the unborn child in the mother's uterus) caused by the mother's use of alcohol during pregnancy. FAS affects about 1 to 3 in every 1,000 live births worldwide, and is the leading known cause of mental retardation in the Western world. French researchers at the University of Nantes in 1968 were the first to make a connection between maternal use of alcohol during pregnancy and birth defects in children. Five years later, American geneticists at the University of Washington in Seattle termed this condition fetal alcohol syndrome.

Children with FAS are small in size and weight at birth and have slow growth rates throughout their development. A child with FAS has characteristic facial features that may include short eye slits, a flattened midface, a smooth and elongated space between the nose and mouth, and a narrow upper lip. Children diagnosed with FAS show evidence of damage to the central nervous system that may be in the form of mental retardation, learning disabilities, developmental disabilities, seizures, or small head size. A child with FAS may develop visual and hearing problems, heart defects and other physical problems, and behavioral problems.

Researchers have found that some individuals who were exposed to alcohol during fetal development show only some of the characteristics of FAS. These individuals are described as having fetal alcohol effects (FAE). However, both FAS and FAE individuals may have some degree of brain damage.

II HOW ALCOHOL AFFECTS THE FETUS

Researchers have proven that alcohol is toxic to the fetus, although exactly how alcohol causes damage is not fully understood. Alcohol can harm fetal cells. It also affects the placenta, the organ through which the fetus absorbs oxygen and nutrients from the mother, reducing the blood flow to the fetus and causing a severe shortage of oxygen.

The extent to which a fetus is damaged by exposure to alcohol depends on when the mother consumed alcohol during her pregnancy, and how much alcohol she consumed, among other factors. Studies of pregnant animals that were fed alcohol have led researchers to conclude that major physical defects in the human embryo, the early developing organism, can be caused by exposure to alcohol in the first trimester—that is, the first three months of pregnancy. Decreased fetal growth is associated with exposure to alcohol in the third trimester. Brain damage can result from exposure of the fetus to alcohol at any point during the pregnancy.

Researchers know that the more alcohol the mother drinks and the longer the fetus is exposed to the mother's alcohol consumption, the more severe will be the child's birth defects. Binge drinking, or heavy alcohol consumption at one sitting, is particularly hazardous to the fetus, because very high levels of alcohol enter the mother's blood stream, and the alcohol is passed into the blood of the fetus through the placenta.

The United States surgeon general recommends that women stop drinking alcohol entirely during pregnancy. Women who are trying to become pregnant, or who suspect they are pregnant, are urged to stop using alcohol in order not to damage the developing embryo.

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Cushing's Syndrome

Cushing's Syndrome, a group of similar disorders caused by excessive levels of hormones called glucocorticoids. These hormones, secreted by the adrenal cortex of the adrenal gland in the kidney, aid carbohydrate processing and affect many other body functions. Symptoms include a red, moon-shaped face; obesity; easily bruised skin; poor healing of wounds; and increased susceptibility to infection. Muscles become weak and wasted, osteoporosis (loss of normal bone density) may develop, and glucose intolerance that can lead to diabetes may occur. Other symptoms include hypertension, acne, amenorrhea in women, and euphoria or other psychological symptoms. The disorder was first described by Harvey Cushing, an American physician, in 1932.

Normally the levels of adrenocorticotrophic hormone (ACTH) in the bloodstream control the amount of glucocorticoids secreted by the adrenal cortex. ACTH is secreted by the pituitary gland in response to the body's demand for glucocorticoids. Glucocorticoids already in the blood slow down the secretion of ACTH so that when glucocorticoid concentrations are at a suitable level ACTH production stops. This mechanism is known as a *negative feedback loop*.

The excess of glucocorticoids that causes Cushing's syndrome can result in a number of ways. For example, it may result from a tumor in the pituitary gland. A pituitary tumor is not affected by negative feedback and secretes large amounts of ACTH even when there are already high levels of glucocorticoids in the blood. The ACTH stimulates the adrenal cortex to make glucocorticoids, resulting in an increase in glucocorticoid concentrations. High levels of ACTH can also result from a tumor outside the pituitary gland. For example, an oat-cell tumor in the lung secretes ACTH, which in turn triggers an increase in the secretion of glucocorticoids.

Cushing's syndrome also can occur when the adrenal cortex itself malfunctions. For example, part of the adrenal cortex may produce excessive amounts of glucocorticoids and thus inhibit the pituitary secretion of ACTH. In rare cases, a tumor of the adrenal gland may cause Cushing's syndrome.

In addition, Cushing's syndrome is a common side effect of prolonged glucocorticoid treatment for another condition. Glucocorticoids are used as antiinflammatory and immunosuppressive drugs for the treatment of rheumatoid arthritis, severe asthma, and many other diseases.

Treatment of Cushing's syndrome depends on its cause, so accurate diagnosis is essential. If it is caused by the administration of glucocorticoids, the drug treatment may be gradually tapered off. If the cause is a pituitary tumor, the tumor can be surgically removed or treated with radiotherapy. If the cause is not in the pituitary gland then it may be possible to remove the adrenal cortex or to treat the symptoms of the disease with drugs that inhibit the glucocorticoids.

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Chronic Fatigue Syndrome

Chronic Fatigue Syndrome (CFS), condition manifesting as a persistent or relapsing fatigue lasting six or more consecutive months. This debilitating fatigue is characteristically accompanied by a combination of associated symptoms, including impaired concentration, short-term memory loss, muscle and joint pain, and sleep disturbances. CFS has previously been known by names such as chronic Epstein-Barr virus (EBV) disease, chronic fatigue immune dysfunction syndrome, epidemic neuromyesthesia, and myalgic encephalomyelitis.

Estimates of the incidence of CFS in the United States range from 4 to 265 of every 100,000 adults. Eighty percent of the diagnosed cases occur in white women, with the average age of onset about 30 years. There is no evidence that CFS can be transmitted from person to person, and pets do not seem to be involved in transmitting the illness.

The cause of CFS is unknown. Some viruses that can establish a chronic infection leading to fatigue and stress, such as EBV, have been implicated. Several other viruses, including human T-cell leukemia virus (HTLV), human herpesvirus-6, and enteroviruses, have also been investigated as the possible cause. Presently, CFS is diagnosed by excluding other known illnesses with similar symptoms. This method of diagnosis is controversial because it is not always possible to confirm that an individual has CFS and not some other fatigue-causing disorder, such as depression or fibromyalgia.

Supportive medications are available for relieving many of the symptoms of CFS, but some treatments can be dangerous if the diagnosis is incorrect. There is no known cure. The course of the illness varies widely among people with CFS: Some become progressively worse, some experience partial improvement, and others recover completely.

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Carpal Tunnel Syndrome

Carpal Tunnel Syndrome, a painful and disabling disorder characterized by inflammation and swelling in the tendons that run through the narrow carpal tunnel in the wrist, and one of the most common of repetitive stress injury. Numbness, tingling, and pain in the base of the thumb and the first three fingers results from the compression of a nerve that shares the carpal tunnel. The syndrome, categorized by the World Health Organization as a work-related musculoskeletal disorder, is caused by excessive and unrelieved repetition of movements that in themselves appear innocuous, such as cutting meat or typing on a computer keyboard. In addition to high frequency of repetition and lack of rest periods, factors that increase risk of hand-wrist damage include awkward or unnatural working posture, use of excessive force in performing a task, and emotional stress.

Carpal tunnel syndrome, one of the cumulative trauma disorders reportedly responsible for 30 to 40 percent of worker's compensation claims in the early 1990s, afflicts burgeoning numbers of office workers. Almost half of all carpal tunnel syndrome cases result in 31 days or more of work loss in the United States. The field of health care responded to this affliction with hand clinics designed to rehabilitate disabled workers. Treatment includes rest, exercises, wrist splints, anti-inflammatory medications, learning stress-reducing movement techniques, making adjustments to the individual's workstation, and surgery to reduce pressure on the afflicted nerve.

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Acquired Immunodeficiency Syndrome

I INTRODUCTION

Acquired Immunodeficiency Syndrome (AIDS), human viral disease that ravages the immune system, undermining the body's ability to defend itself from infection and disease. Caused by the human immunodeficiency virus (HIV), AIDS leaves an

infected person vulnerable to opportunistic infections. Such infections are harmless in healthy people, but in those whose immune systems have been greatly weakened, they can prove fatal. Although there is no cure for AIDS, new drugs are available that can prolong the life spans and improve the quality of life of infected people.

Infection with HIV does not necessarily mean that a person has AIDS. Some people who have HIV infection may not develop any of the clinical illnesses that define the full-blown disease of AIDS for ten years or more. Physicians prefer to use the term *AIDS* for cases where a person has reached the final, life-threatening stage of HIV infection.

II PREVALENCE

AIDS was first identified in 1981 among homosexual men and intravenous drug users in New York and California. Shortly after its detection in the United States, evidence of AIDS epidemics grew among heterosexual men, women, and children in sub-Saharan Africa. AIDS quickly developed into a worldwide epidemic, affecting virtually every nation. By 2000 an estimated 34.7 million adults and 1.4 million children worldwide were living with HIV infection or AIDS. The World Health Organization (WHO), a specialized agency of the United Nations (UN), estimates that from 1981 to the end of 2000 about 21.8 million people died as a result of AIDS. More than 4.3 million of those who died were children under the age of 15.

A North America

In the United States about 40,000 new HIV infections occur each year. More than 30 percent of these infections occur in women, and 60 percent occur in ethnic minorities. In 2000 about 800,000 to 900,000 U.S. residents were infected with HIV, and about 300,000 people were living with full-blown AIDS. In Canada about 4,200 new HIV infections occur each year. About 23 percent of these infections occur in women. In 2000 about 40,000 Canadians were living with HIV infection or full-blown AIDS.

The incidence of new cases of HIV infections and AIDS deaths has significantly decreased in Canada and the United States since 1995. This decrease is attributed to the availability of new drug treatments and public health programs that target people most at risk for infection. But while the overall rate of HIV infection seems to be on a downturn, certain populations appear to be at greater risk for the disease. In the United States in 1987, Caucasians accounted for 60 percent of AIDS cases and blacks and Hispanics only 39 percent. But by 2000 the trend had reversed: 38 percent of new cases were diagnosed in Caucasians and 61 percent in blacks and Hispanics. Likewise the number of female AIDS patients in the United States has increased significantly in recent years, from 7 percent of all AIDS cases in 1985 to 30

percent in 2000. In the United States, African American and Hispanic women accounted for 82 percent of AIDS cases among women in 2000.

B Europe

In western Europe the first cases of AIDS were detected in the early 1980s, and by the late 1990s, at least 30,000 new HIV infections occurred each year. In 2000 more than 540,000 western Europeans were HIV positive, and 20 percent of these cases were women. Before the dissolution of the Union of Soviet Socialist Republics (USSR) in 1991, eastern Europe reported few HIV cases. But since 1995, HIV infection has spread rapidly in cities of several eastern European countries, including Ukraine, Belarus, and Moldova. The WHO estimates that the total number of HIV infections in this region may have risen from less than 30,000 in 1995 to more than 700,000 in 2000.

C Developing Nations

While cases of AIDS have been reported in every nation of the world, the disease affects some countries more than others. More than 95 percent of all HIV-infected people live in the developing world. In these areas, the disease has sapped the populations of young men and women who form the foundation of the labor force. Most die while in the peak of their reproductive years. Moreover, the epidemic has overwhelmed health-care systems, increased the number of orphans, and caused life expectancy rates to plummet. These problems have reached crisis proportions in some parts of the world already burdened by war, political upheaval, or unrelenting poverty.

Nowhere is this better demonstrated than in sub-Saharan Africa, where the number of AIDS cases far exceeds that of all other geographic regions. Of the estimated 16,000 HIV infections that occur each day worldwide, 7,500 of them occur in sub-Saharan Africa. More than 70 percent of all people infected with HIV live in this region. In some countries in the southern part of the continent, including Botswana, Namibia, Swaziland, and Zimbabwe, as much as 25 percent of the population has HIV infection or AIDS.

In Asia the rates of HIV infection remain low relative to many other areas, but the number of reported cases markedly increased in recent years. Health officials fear the virus will affect more people if it spreads through China and India, the world's two most populous countries. For example, 1992 marked the first reported cases of HIV infection in India. By the end of 1999 nearly 4 million adults in India were HIV positive. These cases were mostly confined to 10 of the nation's states, while the remaining 24 states reported low infection rates. HIV infection in India initially was reported primarily in prostitutes, but it has quickly spread to the general population in less than five years. Health officials fear that without public education programs,

cases of HIV infection will escalate over the next decade, causing the AIDS epidemic in India to dwarf the problems seen in sub-Saharan Africa.

In 2000 the WHO estimated that China had 500,000 HIV-positive people in a population of more than 1 billion. However, public health experts are concerned by the fast-rising number of new infections among intravenous drug users who share infected needles. In 2000 HIV prevalence among intravenous drug users ranged from 44 percent to 85 percent in selected communities of drug users in both Yunnan, in southern China, and Xinjiang, in northwestern China. The incidence of HIV infection will likely be exacerbated by the growing sex industry in China. Surveys indicate that as many as 4 million prostitutes work in China. Of these, five out of ten never use a condom to protect themselves or their clients from HIV infection or other sexually transmitted infections. In rural areas of China the incidence of HIV infection is rising because many poverty-stricken people regularly sell their blood. The people who buy the blood use unsterile methods to draw blood, including reusing contaminated needles, which can spread HIV infection.

In Latin America and the Caribbean region nearly 1.8 million people have been diagnosed with HIV infection or AIDS, twice the incidence in the United States and Canada. In Mexico, 150,000 people have been diagnosed with HIV infection or AIDS, and the disease is the third leading cause of death in men aged 20 to 34. Honduras, which accounts for less than a fifth of the population in Central America, reports more than half of the AIDS cases in that region. In the state of São Paulo, Brazil, AIDS has been the leading cause of death among women aged 20 to 34 since 1992.

III CAUSE

AIDS is the final stage of a chronic infection with the human immunodeficiency virus. There are two types of this virus: HIV-1, which is the primary cause of AIDS worldwide, and HIV-2, found mostly in West Africa. On its surface, HIV carries a protein structure that recognizes and binds only with a specific structure found on the outer surface of certain cells. HIV attacks any cell that has this binding structure. However, white blood cells of the immune system known as T cells, which orchestrate a wide variety of disease-fighting mechanisms, are especially vulnerable to HIV attack. Particularly vulnerable are certain T cells known as CD4 cells. When HIV infects a CD4 cell, it commandeers the genetic tools within the cell to manufacture new HIV virus. The newly formed HIV virus then leaves the cell, destroying the CD4 cell in the process. No existing medical treatment can completely eradicate HIV from the body once it has integrated into human cells.

The loss of CD4 cells endangers health because these immune cells help other types of immune cells respond to invading organisms. The average healthy person has over 1,000 CD4 cells per microliter of blood. In a person infected with HIV, the virus steadily destroys CD4 cells over a period of years, diminishing the cells' protective ability and weakening the immune system. When the density of CD4 cells drops to

200 cells per microliter of blood, the infected person becomes vulnerable to any of about 26 opportunistic infections and rare cancers, which take advantage of the weakened immune defenses to cause disease.

IV HOW HIV INFECTION SPREADS

Scientists have identified three ways that HIV infections spread: sexual intercourse with an infected person, contact with contaminated blood, and transmission from an infected mother to her child before or during birth or through breastfeeding.

A Sex with an Infected Person

HIV transmission occurs most commonly during intimate sexual contact with an infected person, including genital, anal, and oral sex. The virus is present in the infected person's semen or vaginal fluids. During sexual intercourse, the virus gains access to the bloodstream of the uninfected person by passing through openings in the mucous membrane—the protective tissue layer that lines the mouth, vagina, and rectum—and through breaks in the skin of the penis. In the United States and Canada, HIV is most commonly transmitted during sex between homosexual men, but the incidence of HIV transmission between heterosexual men and women has rapidly increased. In most other parts of the world, HIV is most commonly transmitted through heterosexual sex.

B Contact with Infected Blood

Direct contact with HIV-infected blood occurs when people who use heroin or other injected drugs share hypodermic needles or syringes contaminated with infected blood. Sharing of contaminated needles among intravenous drug users is the primary cause of HIV infection in eastern Europe, particularly in Ukraine, Russia, Belarus, and Moldova. Epidemics of HIV infection among drug users have also emerged in Georgia, Armenia, Azerbaijan, and Kazakhstan in Central Asia.

Less frequently, HIV infection results when health professionals accidentally stick themselves with needles containing HIV-infected blood or expose an open cut to contaminated blood. Some cases of HIV transmission from transfusions of infected blood, blood components, and organ donations were reported in the 1980s. Since 1985 government regulations in the United States and Canada have required that all donated blood and body tissues be screened for the presence of HIV before being used in medical procedures. As a result of these regulations, HIV transmission caused by contaminated blood transfusion or organ donations is rare in North America. However, the problem continues to concern health officials in sub-Saharan Africa. Less than half of the 46 nations in this region have blood-screening policies. By some estimates only 25 percent of blood transfusions are screened for the

presence of HIV. WHO hopes to establish blood safety programs in more than 80 percent of sub-Saharan countries by 2003.

C Mother-to-Child Transmission

HIV can be transmitted from an infected mother to her baby while the baby is still in the woman's uterus or, more commonly, during childbirth. The virus can also be transmitted through the mother's breast milk during breastfeeding. Mother-to-child transmission accounts for 90 percent of all cases of AIDS in children. Mother-to-child transmission is particularly prevalent in Africa, where the number of women infected with HIV is ten times the rate found in other regions. Studies conducted in several cities in southern Africa in 1998 indicate that up to 45 percent of pregnant women in these cities carry HIV.

D Misperceptions About HIV Transmission

The routes of HIV transmission are well documented by scientists, but health officials continually grapple with the public's unfounded fears concerning the potential for HIV transmission by other means. HIV differs from other infectious viruses in that it dies quickly if exposed to the environment. No evidence has linked HIV transmission to casual contact with an infected person, such as a handshake, hugging, or kissing, or even sharing dishes or bathroom facilities. Studies have been unable to identify HIV transmission from modes common to other infectious diseases, such as an insect bite or inhaling virus-infected droplets from an infected person's sneeze or cough.

V SYMPTOMS

Without medical intervention, AIDS progresses along a typical course. Within one to three weeks after infection with HIV, most people experience flu-like symptoms, such as fever, sore throat, headache, skin rash, tender lymph nodes, and a vague feeling of discomfort. These symptoms last one to four weeks. During this phase, known as acute retroviral syndrome, HIV reproduces rapidly in the blood. The virus circulates in the blood throughout the body, particularly concentrating in organs of the lymphatic system.

The normal immune defenses against viral infections eventually activate to battle HIV in the body, reducing but not eliminating HIV in the blood. Infected individuals typically enter a prolonged asymptomatic phase, a symptom-free period that can last ten years or more. While persons who have HIV may remain in good health during this period, HIV continues to replicate, progressively destroying the immune system. Often an infected person remains unaware that he or she carries HIV and unknowingly transmits the virus to others during this phase of the infection.

When HIV infection reduces the number of CD4 cells to around 200 per microliter of blood, the infected individual enters an early symptomatic phase that may last a few months to several years. HIV-infected persons in this stage may experience a variety of symptoms that are not life-threatening but may be debilitating. These symptoms include extensive weight loss and fatigue (wasting syndrome), periodic fever, recurring diarrhea, and thrush, a fungal mouth infection. An early symptom of HIV infection in women is a recurring vaginal yeast infection. Unlike earlier stages of the disease, in this early symptomatic phase the symptoms that develop are severe enough to cause people to seek medical treatment. Many may first learn of their infection in this phase.

A Opportunistic Infections

If CD4 cell levels drop below 200 cells per microliter of blood, the late symptomatic phase develops. This phase is characterized by the appearance of any of 26 opportunistic infections and rare cancers. The onset of these illnesses, sometimes referred to as AIDS-defining complications, is one sign that an HIV-infected person has developed full-blown AIDS. Without medical treatment, this stage may last from several months to years. The cumulative effects of these illnesses usually cause death.

Often the first opportunistic infection to develop is pneumocystis pneumonia, a lung infection caused by the fungus *Pneumocystis carinii*. This fungus infects most people in childhood, settling harmlessly in the lungs where it is prevented from causing disease by the immune system. But once the immune system becomes weakened, the fungus can block the lungs from delivering sufficient oxygen to the blood. The lack of oxygen leads to severe shortness of breath accompanied by fever and a dry cough.

In addition to pneumocystis pneumonia, people with AIDS often develop other fungal infections. Up to 23 percent of people with AIDS become infected with fungi from the genus *Cryptococcus*, which cause meningitis, inflammation of the membranes that surround the brain. Infection by the fungus *Histoplasma capsulatum* affects up to 10 percent of people with AIDS, causing general weight loss, fever, and respiratory complications.

Tuberculosis, a severe lung infection caused by the bacterium *Mycobacterium tuberculosis*, typically becomes more severe in AIDS patients than in those with a healthy immune system. Between the 1950s and the late 1980s, tuberculosis was practically eradicated in North America. In the early 1990s, doctors became alarmed when incidence of the disease dramatically escalated. This resurgence has been attributed to the increased susceptibility to tuberculosis of people infected with HIV. Infection by the bacterium *Mycobacterium avium* can cause fever, anemia, and diarrhea. Other bacterial infections of the gastrointestinal tract contribute to wasting syndrome.

Opportunistic infections caused by viruses, especially members of the herpesvirus family, are common in people with AIDS. One of the herpesviruses, cytomegalovirus (CMV), infects the retina of the eye and can result in blindness. Another herpesvirus, Epstein-Barr virus (EBV), may cause certain types of blood cancers. Infections with herpes simplex virus (HSV) types 1 or 2 may result in sores around the mouth, genital area, or anus.

Many people with AIDS develop cancers. The destruction of CD4 cells impairs the immune functions that halt the development of cancer. Kaposi's sarcoma is a cancer of blood vessels caused by a herpesvirus. This cancer produces purple lesions on the skin, which can spread to internal organs and cause death. B cell lymphoma affects certain cells of the lymphatic system that fight infection and perform other vital functions. Cervical cancer is more common in HIV-infected women than in women free from infection.

A variety of neurological disorders are common in the later stage of AIDS. Collectively called HIV-associated dementia, they develop when HIV or another microbial organism infects the brain. The infection produces degeneration of intellectual processes such as memory and, sometimes, problems with movement and coordination.

B Symptoms in Children

HIV infection in children progresses more rapidly than in adults, most likely because the immune systems in children have not yet built up immunity to many infectious agents. The disease is particularly aggressive in infants—more than half of infants born with an HIV infection die before age two. Once a child is infected, the child's undeveloped immune system cannot prevent the virus from multiplying quickly in the blood. This extensive virus burden speeds the progression of the disease. In contrast, when adults become infected with HIV, their immune system generally fights the infection. Therefore, HIV levels in adults remain lower for an extended period, delaying the progression of the disease.

Children develop many of the opportunistic infections that befall adults but also exhibit symptoms not observed in older patients. Among infants and children, HIV infection produces wasting syndrome and slows growth (generally referred to as failure to thrive). HIV typically infects a child's brain early in the course of the disease, impairing intellectual development and coordination skills. While HIV can infect the brains of adults, it usually does so toward the later stages of the disease and produces different symptoms.

Children show a susceptibility to more bacterial and viral infections than adults. More than 20 percent of HIV-infected children develop serious, recurring bacterial infections, including meningitis and pneumonia. Some children suffer from repeated

bouts of viral infections, such as chicken pox. Healthy children generally develop immunity to these viral illnesses after an initial infection.

VI DETECTING AND MONITORING HIV INFECTION

Since HIV was first identified as the cause of AIDS in 1983, a variety of tests have been developed that help diagnose HIV infection as well as determine how far the infection has progressed. Other tests can be used to screen donated blood, blood products, and body organs for the presence of HIV.

Doctors determine if HIV is present in the body by identifying HIV antibodies, specialized proteins created by the immune system to destroy HIV. The presence of the antibodies indicates HIV infection because these antibodies form in the body only when HIV is present. HIV antibodies form anywhere from five weeks to three months after HIV infection occurs, depending upon the individual's immune system. The antibodies are produced continually throughout the course of the infection.

The standard test to detect HIV antibodies in the blood is the enzyme-linked immunosorbent assay (ELISA). In this test, a blood sample is mixed with proteins from HIV. If the blood contains HIV antibodies, they attach to the HIV proteins, producing a telltale color change in the mixture. This test is highly reliable when performed two to three months after infection with HIV. The test is less reliable when used in the very early stage of HIV infection, before detectable levels of antibodies have had a chance to form. Doctors routinely confirm a positive result from an ELISA test by using the Western Blot test, which can detect lower levels of HIV antibodies. In this test a blood sample is applied to a paper strip containing HIV proteins. If HIV antibodies are present in the blood, they bind to the HIV proteins, producing a color change on the paper. The combination of the ELISA and the Western Blot test is more than 99.9 percent accurate in detecting HIV infection within 12 weeks following exposure.

Once tests confirm an HIV infection, doctors monitor the health of the infected person's immune system by periodically measuring CD4 cell counts in the blood. The progressive loss of CD4 cells corresponds to a worsening of the disease as the immune system becomes increasingly impaired. Doctors also measure the viral load—the amount of the virus in the blood—using polymerase chain reaction (PCR) technology. PCR tests measure the level of viral ribonucleic acid (RNA), a type of nucleic acid, in blood to determine the rate of HIV growth in an infected person. Knowing the viral load helps doctors estimate an infected person's survival time. For example, studies show that without treatment, the average survival time for people with an HIV viral load greater than 30,000 per microliter of blood is 4.4 years, while those with a viral load below 10,000 per microliter of blood live for an average of ten years.

A modified ELISA test that detects p24 antigen, a protein produced by HIV, can determine if specific drug treatments are having a positive effect on a patient. Blood banks, plasma centers, clinical laboratories, private clinics, and public health departments also use this p24 antigen test to screen for the presence of HIV in blood, blood components, and organs before they are used in medical procedures.

VII DIAGNOSING AIDS

Physicians prefer to differentiate between people who have HIV infection and those who have AIDS. The Centers for Disease Control and Prevention (CDC), based in Atlanta, Georgia, recommends that physicians reserve the diagnosis of AIDS for HIV-infected individuals whose CD4 count falls below 200 cells per microliter of blood. A diagnosis of AIDS can also be made without confirmation of CD4 levels if someone who has no other reason for immune system damage develops an opportunistic disease.

VIII TREATMENT

While no medical treatment cures AIDS, in the relatively short time since the disease was first recognized, new methods to treat the disease have developed rapidly. Health-care professionals focus on three areas of therapy for people living with HIV infection or AIDS: antiretroviral therapy using drugs that suppress HIV replication; medications and other treatments that fight the opportunistic infections and cancers that commonly accompany HIV infection; and support mechanisms that help people deal with the emotional repercussions as well as the practical considerations of living with a disabling, potentially fatal disease.

A Antiretroviral Therapies

Understanding the specific steps in the HIV replication cycle is critical in order for scientists to develop drugs that attack vulnerable stages within the cycle. HIV belongs to a unique group of viruses known as retroviruses, so named because these viruses reverse the usual flow of genetic information within an infected cell. Most viruses store their genetic material in deoxyribonucleic acid (DNA), the double-helix structure that makes up genes. When a virus infects a cell, the viral DNA forms the template for the creation of messenger RNA, a type of ribonucleic acid. This messenger RNA directs the formation of specific proteins, and these proteins, in turn, build new virus particles (see Genetics). In HIV, however, genetic material is stored in two single-stranded RNA molecules. When HIV infects a cell, an enzyme called reverse transcriptase copies the genetic instructions in the virus's RNA and moves it into the DNA. This movement of genetic information from RNA to DNA is the opposite of that which occurs in most cells during protein synthesis.

Another HIV enzyme, called integrase, helps the newly formed viral DNA to become part of the structure of the infected cell's DNA. The viral DNA then forces the infected cell to manufacture HIV particles. A third HIV enzyme, called protease, packages these HIV particles into a complete and functional HIV virus. Over the last decade researchers have created a variety of drugs that block the action of some of the enzymes used in HIV replication. The three main classes of drugs used against HIV are nucleoside analogues, non-nucleoside reverse transcriptase inhibitors, and protease inhibitors.

Nucleoside analogues impede the action of reverse transcriptase, the HIV enzyme that converts the virus's genetic material into DNA. During this conversion process, these drugs incorporate themselves into the structure of the viral DNA, rendering the DNA useless and preventing it from instructing the infected cell to make additional HIV. The nucleoside analogue known as azidothymidine (AZT), which became available in 1987, was the first drug approved by the United States Food and Drug Administration (FDA) to treat AIDS. AZT slows HIV growth in the body, permitting an increase in the number of CD4 cells, which boosts the immune system. AZT also prevents transmission of HIV from an infected mother to her newborn. Since the introduction of AZT, additional nucleoside analogues have been developed, including didanosine (sold under the trade name *Videx*), zalcitabine (*HIVID*), stavudine (*Zerit*), lamivudine (*Epivir*), and abacavir (*Ziagen*). These drugs are not particularly powerful when used alone, and often their benefits last for only 6 to 12 months. But when nucleoside analogues are used in combination with each other, they provide longer-lasting and more effective results.

Non-nucleoside reverse transcriptase inhibitors (NNRTIs), introduced in 1996, use a different mechanism to block reverse transcriptase. These drugs bind directly to reverse transcriptase, preventing the enzyme from converting RNA to DNA. Three NNRTIs are available: nevirapine (*Viramune*), delavirdine (*Rescriptor*), and efavirenz (*Sustiva*). NNRTIs work best when used in combination with nucleoside analogues.

The third group of antiviral drugs, called protease inhibitors, cripples protease, the enzyme vital to the formation of new HIV. When these drugs block protease, defective HIV forms that is unable to infect new cells. Protease inhibitors are more powerful than nucleosides and NNRTIs, producing dramatic decreases in HIV levels in the blood. This reduced viral load, in turn, enables CD4 cell levels to skyrocket. The first protease inhibitor, saquinavir (*Invirase*), was approved in 1995. Since then other protease inhibitors have been approved, including ritonavir (*Norvir*), indinavir (*Crixivan*), nelfinavir (*Viracept*), and amprenavir (*Agenerase*).

A1 Drug Resistance

Clinical studies of treatment with antiretroviral drugs immediately showed that their benefits are short-lived when a single drug is used alone. This short-term effectiveness results when HIV mutates, or changes its genetic structure, becoming

resistant to the drug. The genetic material in HIV provides instructions for the manufacture of critical enzymes needed to replicate the virus. Scientists design current antiretroviral drugs to impede the activity of these enzymes. If the virus mutates, the structure of the virus's enzymes changes. Drugs no longer work against the enzymes, making the drugs ineffective against viral infection.

Genes mutate during the course of viral replication, so the best way to prevent mutation is to halt replication. Studies have shown that the most effective treatment to halt HIV replication employs a combination of three drugs taken together—for instance, a combination of two nucleoside analogues with a protease inhibitor. This regimen, called triple therapy, maximizes drug potency while reducing the chance for drug resistance. The combination of three drugs is often referred to as an AIDS cocktail. In HIV-infected patients who have undergone triple therapy, the viral loads reduced significantly, sometimes to undetectable levels. Their CD4 cell count gradually increased, and they sustained good health with no complications. With this treatment, some patients who were near death were able to return to work and normal physical activity. Triple therapy was introduced in the United States in 1996. That year AIDS deaths in the United States decreased 26 percent, the first decrease since the beginning of the epidemic. In 1997 U.S. AIDS deaths decreased by 56 percent from the year before.

Despite phenomenal success, triple therapy has some drawbacks. This multidrug therapy is quite complicated, requiring patients to take anywhere from 5 to 20 pills a day on a specific schedule. Some drugs must be taken with food, while others cannot be taken at the same time as certain other pills. Even the most organized people find it difficult to take pills correctly. Yet, just one or two lapses in treatment may cause the virus to develop resistance to the drug regimen.

Many people also find it difficult to deal with the unpleasant side effects produced by antiretroviral drugs. Common side effects include nausea, diarrhea, headache, fatigue, abdominal pain, kidney stones, anemia, and tingling or numbness in the hands and feet. Some patients may develop diabetes mellitus, while other patients develop collections of fat deposits in the abdomen or back, causing a noticeable change in body configuration. Some antiretroviral drugs produce an increase in blood fat levels, placing a patient at risk for heart attack or stroke. Some patients suffer more misery from the drug treatment than they do from the illnesses produced by HIV infection.

Perhaps the greatest drawback to triple therapy is its cost, which ranges from \$10,000 to \$12,000 a year. This high cost is well beyond the means of people with low incomes or those with limited health-care insurance. As a result, the most effective therapies currently available remain beyond the reach of the majority of HIV-infected people worldwide.

To decrease the toxic effects of drugs and to defer costly therapy, in 2001 United States federal health officials recommended delaying drug treatment for HIV

infection in people showing no symptoms and who have been infected with HIV for more than six months. The new guidelines call for delaying treatment until an infected person's CD4 cells fall below 350 cells per microliter of blood or the HIV viral load exceeds 30,000 per microliter of blood. Evidence suggests that delaying treatment poses no harm to infected people and, in fact, benefits them by deferring the toxic side effects of the drugs.

A2 Postexposure Prevention

Studies show that under certain circumstances, administering antiretroviral drugs within 24 hours (preferably within one to two hours) after exposure to HIV can protect a person from becoming infected with the virus. Although the effectiveness of postexposure antiretroviral therapy following sexual exposure to HIV remains uncertain, the CDC recommends that health-care personnel exposed to HIV infection from a needle stick or other accident take antiretroviral drugs.

A3 Development of New Drugs

Scientists continue to develop more powerful HIV treatments that have fewer side effects and fewer resistance problems. Some drugs under investigation block the HIV enzyme integrase from inserting viral DNA into the infected cell. Other drugs prevent HIV from binding with a CD4 cell in the first place, thereby barring HIV entry into cells.

Some scientists focus on ways to fortify the immune system. A biological molecule called interleukin-2 shows promise in boosting the immune system's arsenal of infection-fighting cells. Interleukin-2 stimulates the production of CD4 cells. If enough CD4 cells can be created, they may trigger other immune cell responses that can overpower HIV infection.

In other research, doctors hope to bolster the immune system with a vaccine. Most vaccines available today, including those that prevent measles or poliomyelitis, work by helping the body to create antibodies. Such vaccines mark specific infectious agents, such as the measles and polio viruses, for destruction. But many experts believe that an effective HIV vaccine will need to do more than just stimulate anti-HIV antibodies. Studies are underway to develop vaccines that also elevate the production of T cells in the immune system. Scientists hope that this dual approach will prime the immune system to attack HIV as soon as it appears in the body, perhaps containing the virus before it spreads through the body in a way that natural immune defenses cannot. The genetic variability of HIV frustrates efforts to develop a vaccine: A vaccine effective against one type of HIV may not work on a virus that has undergone genetic mutation.

B Treatment of Opportunistic Infections

In addition to antiretroviral therapy to combat HIV infection, effective drug treatments are available to fight many of the medical complications that result from HIV infection. Doctors try to prevent infections before they begin to avoid taxing a patient's weakened immune system unnecessarily. A doctor instructs an HIV-infected person on ways to avoid exposure to infectious agents that produce opportunistic infections common in people with a weakened immune system. Doctors usually prescribe more than one drug to forestall infections. For example, for those who have a history of pneumocystic pneumonia and a CD4 cell count of less than 200 cells per microliter, doctors may prescribe the antibiotics sulfamethoxazole and trimethoprim to prevent further bouts of pneumonia. Patients suffering from recurring thrush may be given the antifungal drug fluconazole for prolonged periods. For people with CD4 cell counts of less than 100 cells per microliter, doctors may prescribe clarithromycin or azithromycin to prevent *Mycobacterium avium* infections.

C Support Mechanisms

A person diagnosed with HIV infection faces many challenges, including choosing the best course of treatment, paying for health care, and providing for the needs of children in the family while ill. In addition to these practical considerations, people with HIV infection must cope with the emotional toll associated with the diagnosis of a potentially fatal illness. The social stigma that continues to surround a diagnosis of AIDS because of the disease's prevalence among gay men or drug users causes many people to avoid telling family or friends about their illness. People with AIDS often feel incredibly lonely as they try to cope with a devastating illness on their own. Loneliness, anxiety, fear, anger, and other emotions often require as much attention as the medical illnesses common to HIV infection.

Since the AIDS epidemic began in the United States in 1981, grassroots organizations have been created to meet the medical and emotional needs of people who have AIDS and also to protect their civil rights. The Gay Men's Health Crisis, founded in 1982, was the first nonprofit organization to provide medical, education, and advocacy services for people with AIDS. The Los Angeles Shanti Group was established in 1983 to provide emotional support and medical guidance to people with AIDS and other life-threatening illnesses. Activist organizations such as the AIDS Coalition to Unleash Power (ACT UP), founded in 1986, have been created to initiate faster change in public policies and to speed up the course of AIDS clinical research. American Foundation for AIDS Research (AMFAR), created in 1985, is the nation's leading nonprofit organization dedicated to the support of AIDS research and the advocacy of fair and compassionate AIDS-related public policies. In Canada, the AIDS Committee of Toronto (ACT) was established in 1983 by community activists intent on fighting for the civil rights of people infected with HIV. As the AIDS epidemic grew, ACT expanded its mission to help people disabled by the disease and

to spread health information to halt the spread of the disease. AIDS Vancouver (AV), also established in 1983, became the principal education, prevention, and support service organization for that city.

Counseling centers and churches provide individual or group counseling to help people with HIV infection or AIDS share their feelings, problems, and coping mechanisms with others. Family counseling can address the emotions of other family members who are disturbed by the diagnosis of HIV infection in another family member. Grief counseling also helps people who have lost friends or family members to AIDS.

In the United States and Canada, government-funded and privately funded organizations help people cope with disease. For instance, local, city-funded clinics provide AIDS testing as well as counseling to prepare people for a test result that indicates HIV infection. Health experts at clinics explain the medical progression of the illness, arrange medical appointments with health-care specialists, and help people choose appropriate treatment options. State-appointed social workers and community nonprofit organizations help people find federally funded programs that offset the high cost of medical care and child care.

The United States Congress has passed legislation to help HIV-infected individuals. In 1990 the Americans with Disabilities Act (ADA) was enacted, protecting people with disabling diseases, including AIDS, from discrimination in activities such as applying for jobs or buying a house. The Ryan White Comprehensive AIDS Resources Emergency Act was established in 1990 and reauthorized in 1996. This program provides medical and dental care, counseling, transportation, and home and hospice care for low-income or uninsured people living with AIDS. The AIDS Drug Assistance Program (ADAP) is funded in large part by this act and administered by all 50 states. It pays for costly AIDS medications for people who do not have private insurance and who are not poor enough to be eligible for Medicaid.

IX PREVENTION

With a vaccine for AIDS years away and no cure on the horizon, experts believe that the most effective treatment for AIDS is to prevent the occurrence of HIV infection. Health officials focus public education programs on altering risky behaviors linked to HIV transmission, particularly unsafe sexual practices and needle-sharing by intravenous drug users. Safe-sex campaigns sponsored by health clinics, social centers, schools, and churches encourage sexual abstinence or monogamy (sexual relations with only one partner). Education programs instruct about the proper way to use condoms to provide a protective barrier against transmission of HIV during sexual intercourse. Needle-exchange programs, which provide clean needles to drug users, enable intravenous drug abusers to avoid sharing HIV-contaminated needles. Needle-exchange programs have been widely criticized because they seem to condone illicit drug use. However, numerous U.S. government-funded studies have

indicated that such programs reduce HIV transmission without promoting greater drug use. To reduce the accidental transmission of HIV during medical procedures, both the United States and Canada have established strict guidelines for health-care settings, including the use of protective clothing and proper instrument disposal.

In the United States, the effectiveness of public education programs that target people at risk for HIV infection was well demonstrated in the gay community of San Francisco, California, in the 1980s. In 1982 and 1983, 6,000 to 8,000 people in San Francisco became infected with HIV. The gay community rallied to promote condom use and advocate monogamy through extensive education programs and public health advertisements geared for gay men. These public education programs were credited with reducing the number of gay men in San Francisco who became HIV infected. By 1993 the number of new infections declined to 1,000, and by 1999, fewer than 500 people were infected each year.

Public education about AIDS has also proven effective in other countries. Uganda was one of the first African countries to report cases of HIV infection. The first cases of AIDS were reported there in 1982, and by the late 1980s Uganda had one of the highest rates of HIV infection in the world. The Ugandan government was one of the first countries to set up a partnership with WHO to create a national AIDS control program called the AIDS Information Centre (AIC). The AIC has established extensive education programs promoting condom use and other methods to prevent HIV from spreading further. The program has also worked with community organizations to change social behaviors that increase the risk of HIV infection. The AIC promotes its message using innovative drama, song, and dance programs, a particularly effective communication method for African communities. AIC established confidential HIV testing services that provide same-day results and community counseling programs. As a result of Uganda's quick response to the AIDS epidemic, the number of HIV infected people in that country has declined significantly since 1993, during a time when most other African nations faced a frightening increase in the incidence of HIV infection.

Public health officials have learned that education programs that teach and reinforce safe behaviors through a series of meetings are more effective than one-time exposure to public-health information provided in a class lecture, magazine article, advertisement, or pamphlet. Education programs tailored to reflect specific ethnic and cultural preferences prove even more effective. For example, the Canadian Aboriginal AIDS Network creates HIV education programs that fight the common misperception among the indigenous peoples of Canada that AIDS is primarily a disease of white, affluent people. Among indigenous communities, the network promotes programs that use colloquial language to increase awareness about safe sex practices and needle use.

X HISTORY

In the short time since the first cases of the AIDS epidemic were reported in 1981, scientists have identified the viral cause of the illness, the basic modes of transmission, accurate tests for the presence of infection, and effective drugs that slow or halt the progression of the disease. During that same period, governments and grassroots organizations around the world were spurred into action to meet the growing need for AIDS education, counseling, patients' rights, and clinical research. Despite these advances, critics observe that many governments were slow to respond to the crisis. For example, United States president Ronald Reagan did not discuss AIDS in public until 1987, more than six years after the start of the AIDS epidemic. By that time, 41,000 Americans had already died from the disease. AIDS advocates believe that the lack of federal support for AIDS research in these early years delayed the development of an effective vaccine or a cure for the disease.

A Origin of the Virus

Using computer technology to study the structure of HIV, scientists have determined that HIV originated around 1930 in rural areas of Central Africa, where the virus may have been present for many years in isolated communities. The virus probably did not spread because members of these rural communities had limited contact with people from other areas. But in the 1960s and 1970s, political upheaval, wars, drought, and famine forced many people from these rural areas to migrate to cities to find jobs. During this time, the incidence of sexually transmitted infections, including HIV infection, accelerated and quickly spread throughout Africa. As world travel became more prevalent, HIV infection developed into a worldwide epidemic. Studies of stored blood from the United States suggest that HIV infection was well established there by 1978.

In 1970, at about the same time that the HIV epidemic was taking hold in Africa, American molecular biologist David Baltimore and American virologist Howard Temin independently discovered the enzyme reverse transcriptase, which could be used to identify retroviruses. Over the next ten years, many retroviruses were identified in animals. But not until 1980, shortly before the first AIDS cases were recognized in the United States, did American virologist Robert Gallo identify the first human retroviruses, HTLV-I and HTLV-II (HTLV stands for human T cell lymphotropic virus).

Other studies demonstrated that these human retroviruses were more closely related to a retrovirus found in African chimpanzees than to each other. This discovery suggests that the human retroviruses may have evolved from retroviruses that originally infected chimpanzees. The chimpanzee retrovirus likely infected people and underwent mutations to form the human retrovirus. In 1999 scientists confirmed that HIV spread from chimpanzees to humans on at least three separate occasions in Central Africa, probably beginning in the 1940s or 1950s.

B Disease First Identified

Beginning in June 1981 the CDC published reports on clusters of gay men in New York and California who had been diagnosed with pneumocystic pneumonia or Kaposi's sarcoma. These two rare illnesses had previously been observed only in people whose immune systems had been damaged by drugs or disease. These reports triggered concern that a disease of the immune system was spreading quickly in the homosexual community. Initially called gay-related immunodeficiency disease (GRID), the new illness soon was identified in population groups outside the gay community, including users of intravenous drugs, recipients of blood transfusions, and heterosexual partners of infected people. In 1982 the name for the new illness was changed to acquired immunodeficiency syndrome, or AIDS.

While the disease was making headlines for the speed with which it was spreading around the world, the cause of AIDS remained unidentified. Fear of AIDS and ignorance of its causes resulted in some outlandish theories. Some thought the disease was God's punishment for behaviors that they considered immoral. These early theories created a social stigma surrounding the disease that still lingers.

Scientists quickly identified the primary modes of transmission—sexual contact with an infected person, contact with infected blood products, and mother-to-child transmission. From these modes of transmission it was clear that the new illness was spread in a specific manner that matched the profile of a viral infection. In 1983 French cancer specialist Luc Montagnier and his colleagues isolated what appeared to be a new human retrovirus from AIDS patients. They named it lymphadenopathy virus (LAV). Eight months later Gallo and his colleagues isolated the same virus in AIDS patients, naming the virus HTLV-III. Eventually, scientists agreed to call the infectious agent human immunodeficiency virus (HIV). In 1985 a new AIDS-causing virus was discovered in West Africa. Named HIV-2, the new virus is closely related to the first HIV, but it appears to be less harmful to cells of the immune system and reproduces more slowly than HIV-1.

Research leading to the development of the ELISA test was conducted simultaneously by teams led by Gallo in the United States and Montagnier in France. In 1985 the ELISA test to identify HIV in blood became available, followed by the development of the Western Blot test. These tests were first employed to screen blood for the presence of HIV before the blood was used in medical procedures. The tests were later used to identify HIV-infected people, many of whom did not know they were infected. These diagnostic tests also helped scientists study the course of HIV infection in populations.

C Defining the Illness

The CDC presented its first definition of AIDS in 1982. The CDC recommended that physicians diagnose AIDS if a person has an illness known to be caused by immune deficiency, as long as there is no known cause for this immune deficiency (people who undergo radiation therapy or who take certain drugs may impair their immune

systems). As more information became known about the course of HIV infection and the nature of the virus itself, this definition of AIDS was revised repeatedly to expand the list of illnesses considered diagnostic indicators of the disease. Early definitions were based on the opportunistic infections commonly found in HIV-infected men. As a result, many women who did not have symptoms covered in the official AIDS definition were denied disability benefits and AIDS-related drug therapies.

The current definition of AIDS was created in 1993 and includes 26 opportunistic infections and cancers, known as diagnostic indicators, that affect both men and women. The definition also emphasizes the importance of the level of CD4 cells in the blood. Today doctors make the diagnosis of AIDS in anyone with a CD4 count below 200 cells per microliter of blood, regardless of the associated illnesses they may have.

XI SOCIAL PERSPECTIVES

Although new and effective AIDS drugs have brought hope to many HIV-infected persons, a number of social and ethical dilemmas still confront researchers and public-health officials. The latest combination drug therapies are far too expensive for infected persons in the developing world—particularly in sub-Saharan Africa, where the majority of AIDS deaths have occurred. In these regions, where the incidence of HIV infection continues to soar, the lack of access to drugs can be catastrophic. In 1998, responding to an international outcry, several pharmaceutical firms announced that they would slash the price of AIDS drugs in developing nations by as much as 75 percent. However, some countries argued that drug firms had failed to deliver on their promises of less expensive drugs. In South Africa government officials developed legislation that would enable the country to override the patent rights of drug firms by importing cheaper generic medicines made in India and Thailand to treat HIV infection. In 1998, 39 pharmaceutical companies sued the South African government on the grounds that the legislation violated international trade agreements. Pharmaceutical companies eventually dropped their legal efforts in April 2001, conceding that South Africa's legislation did comply with international trading laws. The end of the legal battle was expected to pave the way for other developing countries to gain access to more affordable AIDS drugs.

A Testing AIDS Drugs and Vaccines

AIDS research in the developing world has raised ethical questions pertaining to the clinical testing of new therapies and potential vaccines. For example, controversy erupted over 1997 clinical trials that tested a shorter course of AZT therapy in HIV-infected pregnant women in developing countries. Earlier studies had shown that administering AZT to pregnant women for up to six months prior to birth could cut mother-to-child transmission of HIV by up to two-thirds. The treatment's \$800 cost, however, made it too expensive for patients in developing nations.

The controversial 1997 clinical trials, which were conducted in Thailand and other regions in Asia and Africa, tested a shorter course of AZT treatment, costing only \$50. Some pregnant women received AZT, while others received a placebo—a medically inactive substance often used in drug trials to help scientists determine the effectiveness of the drug under study. Ultimately the shorter course of AZT treatment proved to be successful and is now standard practice in a growing number of developing nations. However, at the time of the trials, critics charged that using a placebo on HIV-infected pregnant women—when AZT had already been shown to prevent mother-to-child transmission—was unethical and needlessly placed babies at fatal risk. Defenders of the studies countered that a placebo was necessary to accurately gauge the effectiveness of the AZT short-course treatment. Some critics speculated whether such a trial, while apparently acceptable in the developing nations of Asia and Africa, would ever have been viewed as ethical, or even permissible, in a developed nation like the United States.

Similar ethical questions surround the testing of AIDS vaccines in developing nations. Vaccines typically use weakened or killed HIV to spark antibody production. In some vaccines, these weakened or killed viruses have the potential to cause infection and disease. Critics questioned whether it is ethical to place all the risk on test subjects in developing regions such as sub-Saharan Africa, where a person infected by a vaccine would have little or no access to medical care. At the same time, with AIDS causing up to 5,500 deaths a day in Africa, others feel that developing nations must pursue any medical avenue for stemming the epidemic and protecting people from the virus.

B Economic Burden

For the struggling economies of some developing nations, AIDS has brought yet another burden: AIDS tends to kill young adults in the prime of their lives—the primary breadwinners and caregivers in families. According to figures released by the United Nations in 1999, AIDS has shortened the life expectancy in some African nations by an average of seven years. In Zimbabwe, life expectancy has dropped from 61 years in 1993 to 49 in 1999. The next few decades may see it fall as low as 41 years. Upwards of 11 million children have been orphaned by the AIDS epidemic. Those children who survive face a lack of income, a higher risk of malnutrition and disease, and the breakdown of family structure.

In Africa, the disease has had a heavy impact on urban professionals—educated, skilled workers who play a critical role in the labor force of industries such as agriculture, education, transportation, and government. The decline in the skilled workforce has already damaged economic growth in Africa, and economists warn of disastrous consequences in the future.

C Social Stigma and Discrimination

From the early days of the identification of AIDS, the disease has been powerfully linked to behaviors that are illegal (such as illicit drug use) or are considered immoral by many people (such as promiscuity and homosexuality). Consequently, a diagnosis of AIDS was a mark of disgrace, although medical research revealed that the disease follows well-defined modes of transmission that can affect any person. As the extent of the epidemic unfolded, misinformation about AIDS and how it is transmitted triggered widespread fear of contracting the disease. Some communities responded with hysteria that resulted in violence. In the United States in 1987, a Florida family with three HIV-positive sons who had become infected from blood transfusions were driven from their home when it was torched by an arsonist. In other communities, parents protested when HIV-infected children attended school. In many areas of the world, women in particular may face consequences if their HIV status is discovered. Reports indicate that many HIV-infected women are subject to domestic violence at the hands of their husbands—even if the husbands themselves are the source of infection. As a result, some women in developing nations fear being tested for HIV infection and cut themselves off from medical care and counseling.

In addition to social stigma, HIV-infected persons must grapple with more immediate concerns—a daily struggle for basic medical care and other basic rights in the face of discrimination and fear because of their HIV status. In China, for example, the number of HIV-positive individuals is a comparatively small problem so far. Yet nurses and other medical personnel who fear infection commonly refuse to perform procedures on HIV-infected people. This sort of discrimination against HIV-infected individuals has long been a problem in the United States. In 1998 the United States Supreme Court heard the case of Sidney Abbott, a young woman in Maine who sued dentist Randon Bragdon after he refused to treat her when he learned of her HIV-positive status. Basing its ruling on the Americans with Disabilities Act, the Supreme Court ruled in *Bragdon v. Abbott* that the woman's HIV infection constituted a disability, even though she suffered from no disease symptoms. AIDS advocates expect this decision to protect the rights of many people with AIDS in the United States.

Some developing nations, such as Uganda, have met the AIDS crisis head-on, attempting to educate citizens and change high-risk behaviors in the population. However, other nations have been slow to even acknowledge the disease. In India, for example, the nation's prime minister did not speak publicly about the dangers posed by the epidemic until 1999.

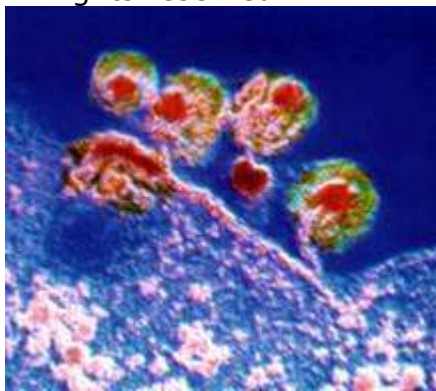
In developed nations, some of the stigma attached to a diagnosis of AIDS has lessened in recent years, in part due to the admissions by public figures and celebrities, especially in the United States, that they were HIV infected. The deaths from AIDS of actor Rock Hudson and tennis player Arthur Ashe, and the AIDS advocacy roles of basketball player Magic Johnson and Olympic diver Greg Louganis have personalized the disease and helped society come to terms with the enormity of the epidemic.

To some scientists, the AIDS epidemic signals a troubling trend in humanity's future. Along with other deadly microbial threats of recent years—most notably Ebola virus, which has caused sporadic epidemics in Africa, and hantavirus, which broke out in the American Southwest in the early 1990s—AIDS is viewed by some as yet another in a series of emerging diseases that demonstrate how vulnerable humans are to newly encountered microbes. With population and land development increasing, humans have encroached farther into rain forests and other formerly wild areas, unleashing previously unknown disease agents. Meanwhile, global travel has become faster, more convenient, and more accessible to many people. Some scientists are worried by these trends, fearing the potential for an as-yet-unknown pathogen to arise and spread quickly and lethally around the globe.

The social, ethical, and economic effects of the AIDS epidemic are still being played out, and no one is entirely certain what the consequences will be. Despite the many grim facts of the AIDS epidemic, however, humanity is armed with proven, effective weapons against the disease: knowledge, education, prevention, and the ever-growing store of information about the virus's actions.

Contributed By:
John G. Bartlett

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Human Immunodeficiency Virus

The human immunodeficiency virus (HIV), which causes acquired immunodeficiency syndrome (AIDS), principally attacks CD4 T-cells, a vital part of the human immune system. As a result, the body's ability to resist opportunistic viral, bacterial, fungal, protozoal, and other infection is greatly weakened. *Pneumocystis carinii* pneumonia is the leading cause of death among people with HIV infection, but the incidence of certain types of cancers such as B-cell lymphomas and Kaposi's sarcoma is also increased. Neurological complications and dramatic weight loss, or "wasting," are characteristic of endstage HIV disease (AIDS). HIV can be transmitted sexually; through contact with contaminated blood, tissue, or needles; and from mother to child during birth or breastfeeding. Full-blown symptoms of AIDS may not develop for more than 10 years after infection.

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PARENTAL ALIENATION SYNDROME

To Parents, Stepparents, Spouses, Ex-Spouses, Grandparents, Children and Anyone Else Affected by Parental Alienation Syndrome (P.A.S.):

Separation and divorce almost always represent a painful and stressful period of life. When children are involved, the situation only gets more complicated for all concerned. Fortunately, for the majority of divorcing families, the immediate disruption and upset of this difficult life transition tends to dissipate within six months to one year of a marital break-up. For these families, a new sense of "normal" is established and life goes on....

However, for a growing number of divorcing families, unfortunately this is not the case.

This Website is for Families Struggling with the Damaging and Destructive Effects of Parental Alienation Syndrome (P.A.S.)

If your children are suddenly rejecting you or acting "uncharacteristically" hostile toward you, AND if your ex-spouse seems to be interfering with the warm and loving relationship you once had with them, then it is quite possible that an alienating process is already underway. If on the other hand, you have already figured out that your children are being deliberately and without cause alienated from you, then you know first-hand how destructive and painful this has been for your children to endure. Whatever your situation, you need information and strategies about how to cope with this extremely malicious and potentially dangerous form of child abuse.

One of the greatest obstacles to effectively dealing with P.A.S. is appropriately informing those who have direct involvement with divorcing families, children and the administration of the law. These include: attorneys, judges, guardian ad litem, custody evaluators, mediators, psychologists, family therapists, Child Protective Services, physicians, teachers and police. The reality is what little information may be currently available to these authorities is often clouded by misinformation. Getting reliable information about P.A.S. into the hands of those who are the gatekeepers and decision makers for children is the first step to ensuring their rights to maintain a relationship with both parents are protected.

This website is a "work in progress" as we plan to continually add information and resources to it as time goes on. Please feel free to drop by from time to time to check out the information that has been added. Send our url to anyone you feel may benefit from what this website has to offer. Finally, you may also use the articles on this site as long as you give credit to Dr. Reena Sommer as the author.

"The Issues Surrounding the Parental Alienation Syndrome (P.A.S.)"

a brief report written by

Dr. Reena Sommer

[**CLICK HERE**](#)

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What is Internal Medicine?

Internal Medicine is a non-surgical medical specialty concerned with diseases of internal organs in adults. Physicians who specialize in the field, known as internists, are skilled in disease prevention and in managing complex disorders of the body. Internists may be either generalists or specialists.

General internists typically act as personal physicians, developing long-term relationships with patients. Internists give patients regular physical examinations, offer preventive care, diagnose and treat most nonsurgical illnesses, and refer serious or unusual cases to an appropriate specialist. If a patient complains of persistent stomach problems, for example, a general internist might refer the patient to a gastroenterologist, an internist who specializes in disorders of the digestive system.

Within the field of internal medicine, nine subspecialties are recognized: cardiology, the treatment of diseases of the heart and blood vessels; endocrinology, the study of glands and other structures that secrete hormones; gastroenterology, the care of conditions of the digestive tract, liver, and pancreas; hematology, the study of blood and blood-forming tissues; infectious disease, the study of severe or unusual infections; nephrology, the diagnosis and treatment of kidney diseases; oncology, the study and treatment of cancerous tumors; pulmonary disease, concerned with disorders of the lungs and other components of the respiratory system; and rheumatology, the treatment of disorders involving joints and other connective tissues. An additional subspecialty gaining prominence is geriatrics, the study of diseases affecting older adults.

The development and widespread use of many technologies have enabled internists to perform procedures that formerly were considered the responsibility of surgeons. For example, a procedure called endoscopy performed using an illuminated tubular instrument called an endoscope permits doctors to examine and photograph internal organs and manipulate tools inside the body without invasive surgery. Another tool, a narrow tubular device called a cardiac catheter, permits physicians to inject drugs or fluids directly into the heart.

The origins of internal medicine date back to the late 19th century, when the practices of general medicine and surgery began to split into separate disciplines. Over time, internists became hospital-based generalists who played a role somewhere between those played today by family physicians and surgical specialists. Since the mid-1900s internal medicine in the United States has shifted from a primarily generalist field to a discipline in which roughly 65 percent of all internists are certified as sub-specialists.

Those seeking a career in internal medicine must obtain a medical degree and complete a three-year in-hospital internal medicine training program. Internists interested in a subspecialty must spend one or two additional years studying that discipline and must pass a certification test. The specialty board for internal medicine, the American Board of Internal Medicine, was established in 1936.

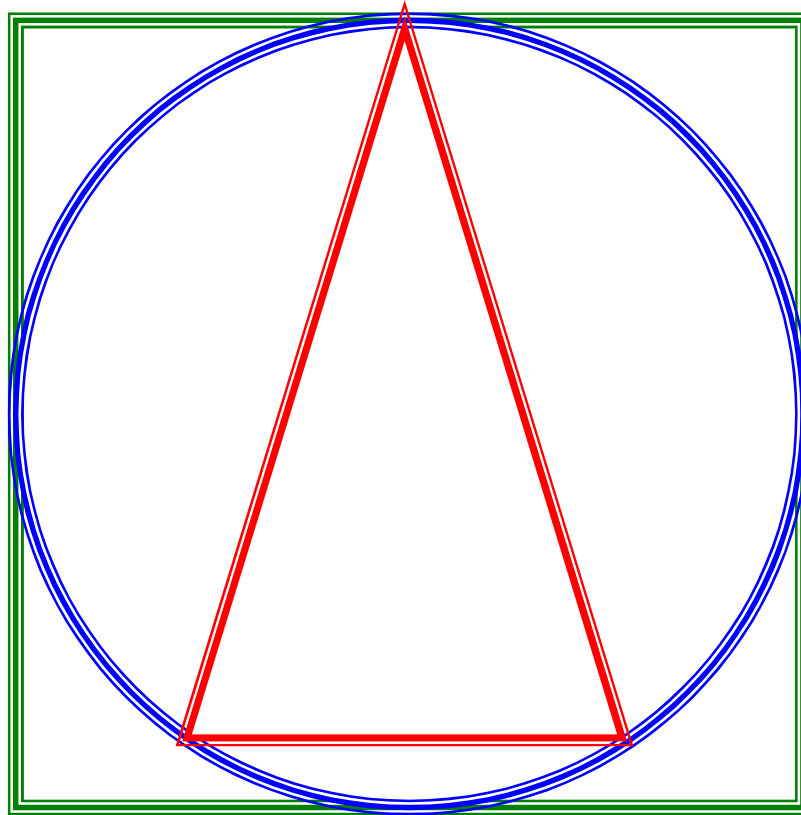
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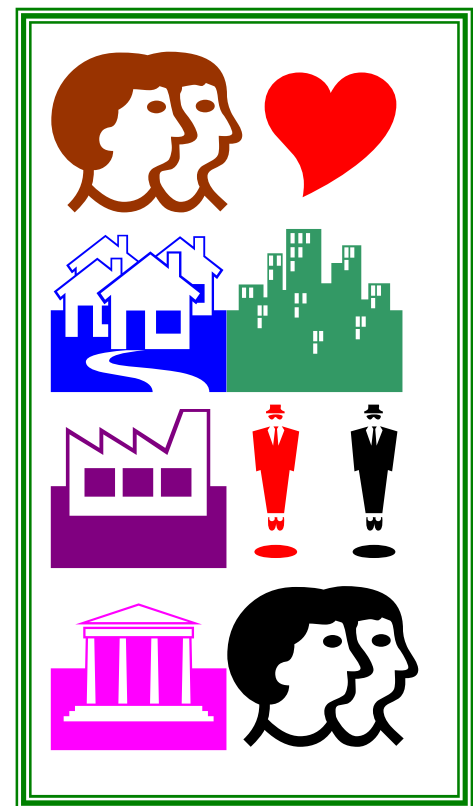
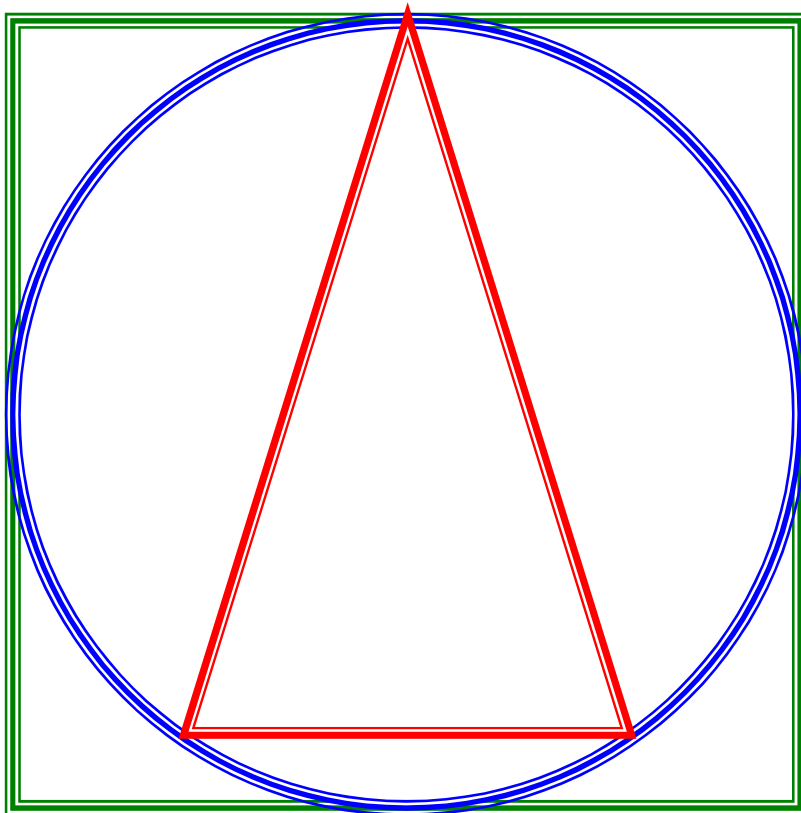
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BERMENT

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18-11-1999.

LOVE FOREVER MOM.

THE TEXT AND GRAPHICS ON THE FOLLOWING PAGES HAVE BEEN EDITED TO PROVIDE FOR THE MATERIAL TO BE USED IN SINGLE AND MULTIPLE COMPUTER AND OVERHEAD PROJECTOR PRESENTATIONS IN OUR LOCAL CARIBBEAN ENVIRONMENT. WE ALSO HOPE TO USE THIS EDITED VERSION IN ALL OUR FUTURE PARENTING TRAINING PROGRAMMES. THE PERMISSION OF THE AUTHOR MS.RHIA ROGERS HAS BEEN REQUESTED FOR SO DOING IN **MARCH 2001.**

SIGNED.....DONALD BERMENT Secretary MAVAW.



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. Cell: 753-0804, Fax: 637-0924.

Email: mavawsec@yahoo.com. Web Site: <http://www.mavaw.com>.



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Mon/5th/March/2001

Our Ref.: RR/Par/R-1

Your Ref:

Ms. Rhia Rogers,
P.O. Box 1215,
Laguna Beach,
CA. 92652,
U.S.A.



Subject: Request For Permission To Use An Edited Version Of Your Text On Parenting---© 1997

Dear Ms. Rogers,

After reading your book “ *How To Stop The Hassles And Get Your Children To Do What You Ask,*” which I bought for \$12.00 TT. (2 US) on the travelling book ship LOGOS 11, on Wednesday, 16th September 1998; I have used the Method successfully in adjusting my Supervision and Training of my daughter. My only regret is that I did not have the benefit of your experience to shape her earlier years of development.

Our beloved twin island State of Trinidad and Tobago, like the rest of the world, is having its share of VIOLENCE and INDISCIPLINE and your Book has the potential to address one part of the SOLUTION and that is PARENTING TRAINING.

As a result, in order to continue to assist in my Country's Development, I have taken the liberty to EDIT the Text and GRAPHICS of your Book so that it can be used in COMPUTER / OVERHEAD PROJECTOR PRESENTATIONS and our Future Parental Training Programs in our Local and Caribbean Environment.

We therefore respectfully request permission to use your Material as aforementioned and enclose a copy of the EDITED PAGES for your perusal. PART TWO will be done

I have enclosed information on our Organisation and the type of work we have been involved with the past 6 1/2 years so that you can see what we do as a NonGovernmental Organisation.

Signed.....DONALD BERMENT Secretary MAVAW.

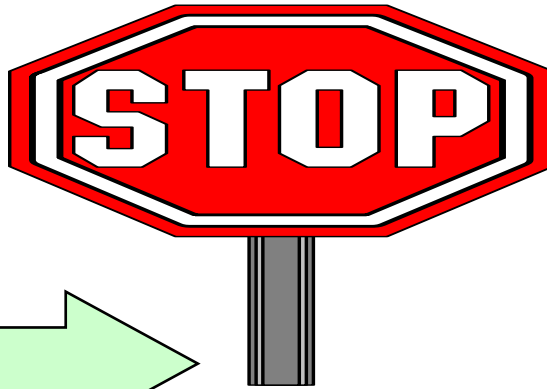
Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators : David Law, Johnny Bharath.

P.O.R.O.

*How
To*



The Hassles
***And Get Your Children
To Do What You Ask.***



*By
Rhia Rogers*

Edited For Use on Computers In March 2001

By

Men Against Violence Against Women (MAVAW)

Editing and Design: Paige Rhine

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Requests for permission should be sent to: -

**Rhia Rogers
P.O. Box 1215
Laguna Beach, CA 92652.**

How This Book Came To Be

The Materials from my PARENTING SEMINARS and WORKSHOPS have been Distilled and Condensed into this Book, which is Straightforward and Easy to Read.

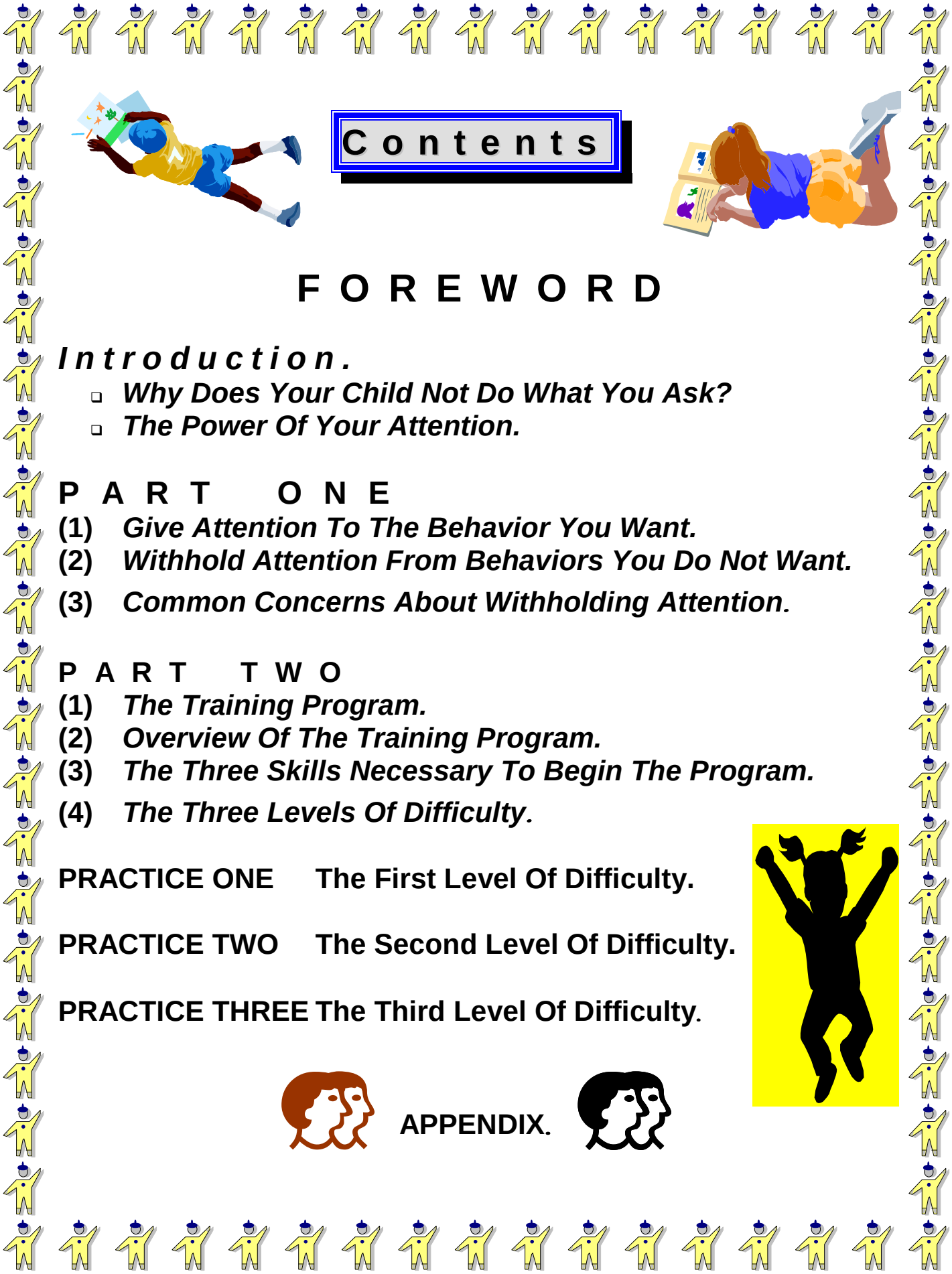
You will find that you can read this Book QUICKLY and you will learn the Practical Skills, which I know, work like MAGIC to Stop the HASSLES!

Rhia Rogers.

We are interested in
your success with
this Program.
Please send your
views and comments
to the address given
above.
Fax: 714-497-1011.



If you would like to
order a copy of this
Book, please send: -
☺ Your name and
address
☺ \$10.00 To Rhia
Rogers at the above
address.



Contents



FOREWORD

Introduction.

- ❑ *Why Does Your Child Not Do What You Ask?*
- ❑ *The Power Of Your Attention.*

P A R T O N E

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- (2) *Withhold Attention From Behaviors You Do Not Want.*
- (3) *Common Concerns About Withholding Attention.*

P A R T T W O

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- (2) *Overview Of The Training Program.*
- (3) *The Three Skills Necessary To Begin The Program.*
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PRACTICE ONE The First Level Of Difficulty.

PRACTICE TWO The Second Level Of Difficulty.

PRACTICE THREE The Third Level Of Difficulty.



APPENDIX.





FOREWORD



PARENTING IS: The Most Joyful Job You Will Ever Have.

- 1. It is Also The Toughest.**
- 2. Parenting Takes TIME, ATTENTION and PATIENCE.**
- 3. Most Of All, Parenting Takes LOVE.**

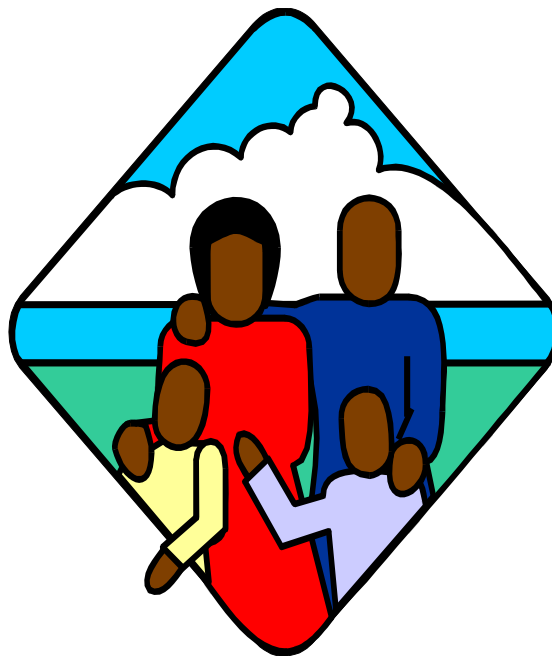
DURING THE TODDLER AND INFANT YEARS: -

You Must Meet All Your Child's Needs. This Includes FEEDING, CHANGING, BATHING and DRESSING Your Child. It Also Includes Helping Your Child LEARN—Starting From Infancy—By TALKING and PLAYING With Him/Her.

AS YOUR CHILD GROWS: -

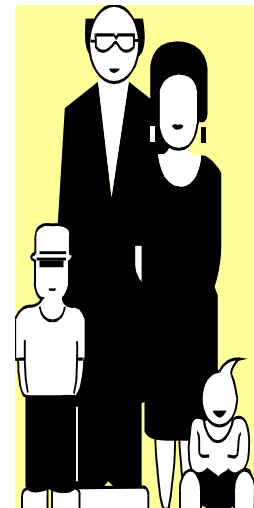
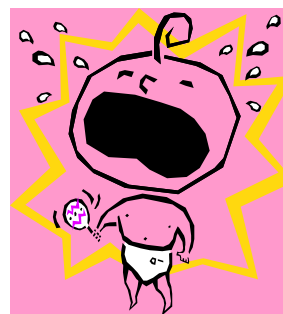
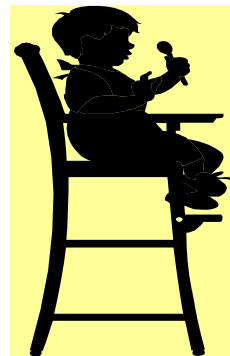
So Does Your Role as a Parent. For Example, You Become Your Child's FIRST,

- 1. TEACHER**—Answering Your Child's Questions About Why Things Happen and How Things Work.
- 2. COUNSELOR**—Guiding Your Child Through Good Times and Bad Times.
- 3. PROTECTOR**—Guarding Against The Evil in the World and Pointing Out the Good.
- 4. ROLE MODEL**—The Behaviour you exhibit as you guide and protect your child throughout his/her growth is the one that will most likely exhibit in their lives.



WHY IS IT IMPORTANT TO LEARN PARENTING SKILLS?

1. Because You Can Help Your Child Reach His/Her Full Potential With Those **SKILLS**.
2. Because You Need Them To Help Meet Your Child's: -
 - (a) **PHYSICAL NEEDS.**
 - (b) **EMOTIONAL NEEDS.**
 - (c) **INTELLECTUAL NEEDS.**
3. Because What You Do Or Do Not Do—As a **PARENT**, Can Have A Lasting Effect On Your Child's Life.
4. Your **LOVE** And **CARE** Pave The Way For: -
 - (a) **HIGH SELF-ESTEEM.**
 - (b) **HEALTHY RELATIONSHIPS.**
 - (c) **GOOD HEALTH.**
 - (d) **BALANCED PERSONALITY.**
5. Your **LOVE** Is Precious To Your Child. Prepare Yourself Properly.



Introduction

At times it may seem like an impossible task to get your child to do the Simple Everyday things you ask.

This Book will show you how to eliminate these Exhausting HASSLES.



This Book is not about how to DISCIPLINE your Child when S/he does not do what you Ask.

The Focus of this Book is TRAINING.

The whole Purpose of TRAINING is so that LESS Discipline and Punishment is Necessary.

Please send us your views after using this PROGRAM

About The Author

Rhia Rogers has worked with Children and Parents for over 40 years. The TRAINING PROGRAM in this Book is based on years of teaching Children in the Classroom and Helping Parents Train their Children. She has seen this Program work for Thousands of Parents who wanted to learn How to STOP the Everyday HASSLES with their Children. After retiring from teaching, Rhia Rogers has presented this Material in her Workshops and Seminars in Southern California.

Details about Men Against Violence Against Women(MAVAW) are on our Website:

<http://www.mavaw.com>. Email: mavawsec@yahoo.com.



Why Does Your Child Not Do What You Ask?

There can be Many Reasons why your child does not listen and do what you ask. But often the MAIN REASON is that S/He gets ATTENTION for Not Doing what you ask.

Any time your Child gets ATTENTION for not doing what you asked, you are TRAINING your Child to NOT DO what you ask.

So in other words: -

- ❑ Any time you give ATTENTION to your Child's noncompliant Behavior
- ❑ You reinforce that noncompliant Behavior
- ❑ And you continue to get more of the Behavior that you do not want.

Let us take a look at HOW you might give your Child ATTENTION for NOT DOING what you ask.

Example one (1): If you said to your Child, "PLEASE FEED THE DOG", and s/he does not feed the Dog one hour later and you said "THE POOR DOG IS HUNGRY, DIDN'T YOU FEED HIM? YOU NEED TO FEED HIM NOW. "

Ask yourself; did you give your Child ATTENTION for DOING what you asked, or for NOT DOING what you asked?

Yes, your Child received ATTENTION for NOT DOING what you asked, so your Child will CONTINUE to NOT FEED THE DOG.



Your Child Will Do Whatever S/He Gets Your ATTENTION For Doing!



Example two (2) : If you said to your Child ***"PUT YOUR SHOES ON SO THAT WE CAN LEAVE, "*** and S/He continued to play, so you said, ***"HURRY UP AND GET YOUR SHOES ON. WE HAVE TO GO, WE ARE GOING TO BE LATE. "***

Ask yourself; did you give your Child ATTENTION for DOING what you asked or for NOT DOING what you asked?

Yes, your Child received ATTENTION for NOT DOING what you asked, so S/He will continue to NOT PUT ON HER/HIS SHOES, because that is what S/He received ATTENTION for DOING.

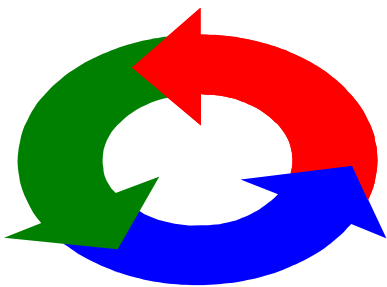
***Any Kind Of
Attention You Give
To Non-Compliant
Behavior***

***Creates More
Non-Compliant
Behavior.***

As you can see, even when you are trying to be HELPFUL, you are reinforcing your Child's Noncompliance if:

- ❑ You give ATTENTION to his/her Noncompliance by REMINDING, QUESTIONING, LECTURING, BLAMING, WARNING, COMPLAINING OR BARGAINING.
- ❑ You give ATTENTION by letting you VOICE become LOUDER, ANGRIER, FASTER, HIGHER, PLEADING OR THREATENING.

How do you get out of this VICIOUS CYCLE, where the Harder you try to get Your Child to DO WHAT YOU ASK, the More S/He Does Not Do It.



**HOW DO I STOP THIS NO-WIN
CYCLE? THAT IS WHAT
THIS BOOK IS ALL ABOUT.
READ ON!**

PAGE TWO OF TWO

The Power Of Your Attention

The way out of this NO-WIN Cycle, is to: -

- Give **ATTENTION** to the Behaviors that you do want and
- Stop giving **ATTENTION** to the Kinds of Behaviors you don't want.

YOU MAY BE AWARE OF THESE TWO BASIC PRINCIPLES, BUT APPLYING THEM CAN OFTEN BE DIFFICULT AND FRUSTRATING FOR MANY PARENTS.

To tackle this PROBLEM, this Book has been Divided into TWO PARTS: -

PART ONE (1) : A Review of some General Ways to Practice giving ATTENTION for the Behaviors you want and withholding ATTENTION from the Behavior you do not want.

PART TWO (2) : A Training Program, in which you will learn step-by-step METHODS in TRAINING your Child to do what you ask.

Let us take one more example: - **Example three (3) :-**
If you said to your Child, "COME ON, FINISH YOUR SANDWICH. YOU SAID YOU WERE HUNGRY, THAT'S WHY I MADE YOU A WHOLE SANDWICH. EAT JUST A FEW MORE BITES." And later you said, "IF YOU EAT THE REST OF YOUR SANDWICH, YOU CAN HAVE A TREAT,"



Yes, your Child received ATTENTION for NOT DOING What you asked, so S/He will continue to NOT EAT THE SANDWICH, because ATTENTION was given to that ACT.

PAGE ONE OF TWO.



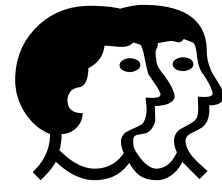


Give Some Of Your Own Experiences On This Page

NOW ON TO PART ONE



Part One



FIRST: Give Attention To The Behaviors You Want.

Catch Your Child Doing Something “Good”

Make comments when your Child is cooperative or involved in any Positive Behavior. Use any opportunity to give her/him ATTENTION for Behavior that you like.

“MEGAN, I LIKED THE WAY YOU PLAYED WITH TAYLOR TODAY. YOU TOOK TURNS WITH THE BIKE. THAT WAS GREAT. “

“EMMA, I NOTICED WHEN YOU SAW ME COMING, YOU QUICKLY GOT YOUR BOOKS, THAT HELPS ME PICK DAD UP TIMELY, I APPRECIATE THAT, THANKS.

“MARK, I REALLY LIKED THE WAY YOU WERE BEING QUIET WHEN I WAS ON THE PHONE. CONSIDERATION IS A VERY NICE QUALITY TO HAVE.”

“ELIZABETH, I JUST FINISHED TAKING MY SHOWER AND YOU DID NOT KNOCK ON THE DOOR. IT WAS A BIG HELP TO ME THAT YOU LET ME HAVE THAT TIME TO GET READY. IT REALLY MAKES ME HAPPY THAT YOU COULD DO THAT.”



PAGE ONE OF EIGHT.

Give Indirect ATTENTION For Positive Behaviour

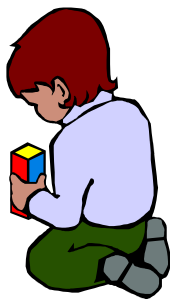
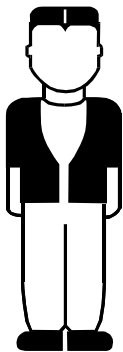
Children Listen and Believe what they OVERHEAR you say about them. Your Child has heard you tell others how Badly S/He has behaved. It will have a powerful Effect on him/her, to hear you tell others what you liked about what S/He did instead.

“NANA, WHEN I ASKED BILLY TO PUT ON HIS SHOES, HE DID IT QUICKLY AND WE WERE ABLE TO LEAVE RIGHT AWAY, SO THAT WE COULD GET HERE ON TIME. I WAS SO PLEASED THAT HE DID THAT.”

“MARK HAS BEEN SO COPERATIVE TODAY. WHEN I WENT TO SCHOOL TO PICK HIM UP, I SAID, LET’S GO MARK, AND HE WENT TO GET HIS THINGS AND CAME RIGHT OUT TO THE CAR. I FELT VERY HAPPY ABOUT THAT.”

“SHARON, I WAS ABLE TO ACCOMPLISH A LOT TODAY AND HOLLY HELPED. WHEN I ASKED HER TO PICK UP HER TOYS SO THAT I COULD VACCUM, SHE QUICKLY PICKED THEM ALL UP AND PUT THEM IN HER CHEST. I FELT GOOD THAT SHE WAS ABLE TO DO THAT.”

“MRS. CONRAD, WHEN I ASKED KATIE TO GET READY FOR SCHOOL TODAY, SHE GOT DRESSED AND CAME TO THE BREAKFAST TABLE WITHOUT ME HAVING TO REMIND HER. I AM SO PROUD OF HER FOR DOING THAT.”



**Let Your Child Anticipate Hearing Something Good
Told About His/Her Behavior.**

Anticipation of Hearing something Good, is a Powerful way to reinforce your Child's Positive Behavior.

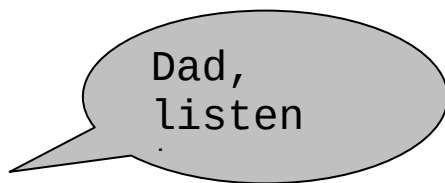
Let your Child ANTICIPATE Hearing about His/Her Good Behavior.

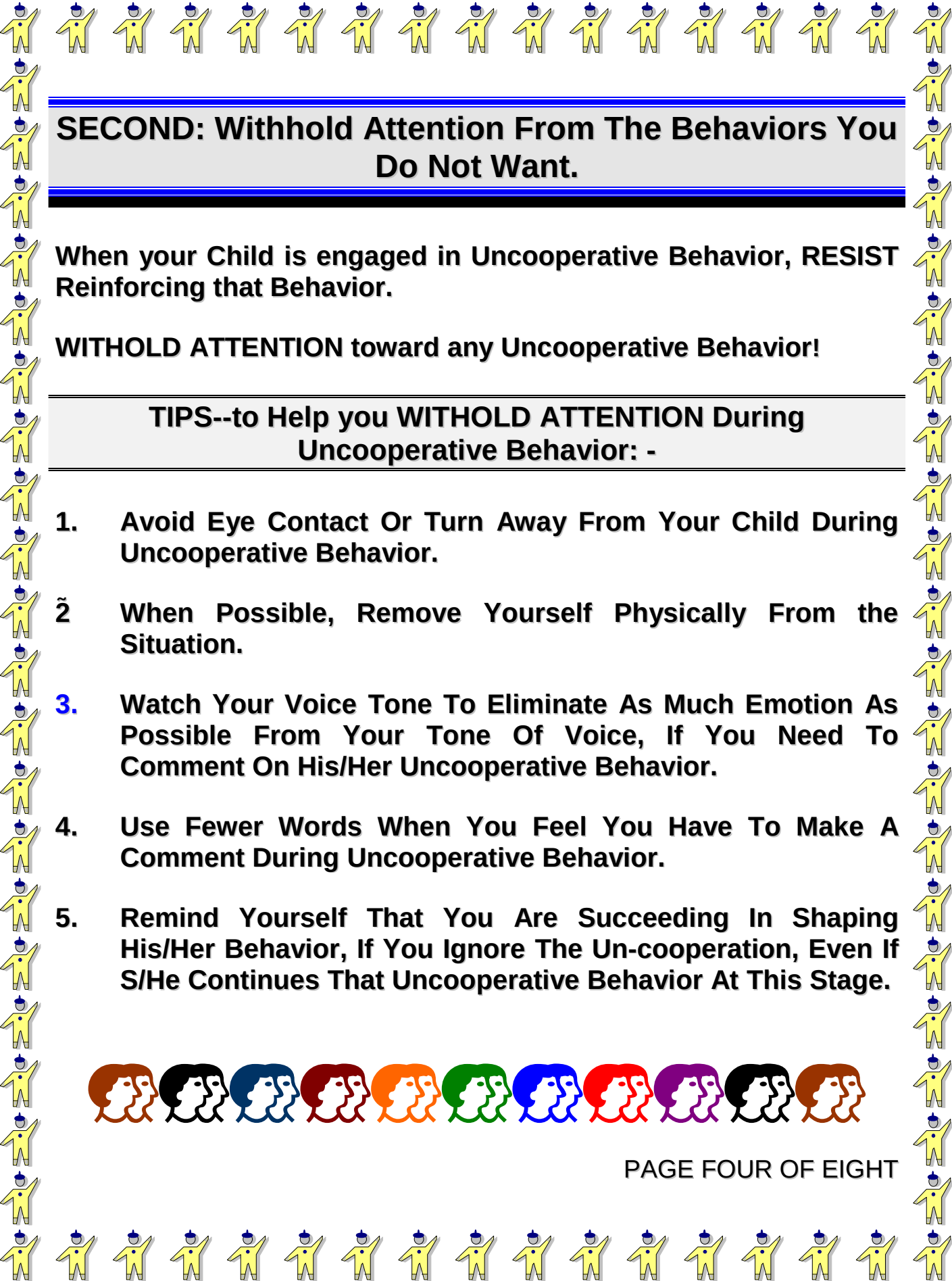
For Example, tell your Child that you are going to tell her/his Father what she/he did when he gets home.

The old "WAIT UNTIL YOUR FATHER GETS HOME" phrase will take on a whole Different meaning.

Write yourself a Note and say ***"MARY, I AM GOING TO WRITE A NOTE TO REMIND MYSELF TO TELL DAD HOW WELL YOU COOPERATED TODAY. HE WILL WANT TO KNOW ABOUT WHAT YOU DID."***

Your Child will look forward with Great ANTICIPATION to receiving Even More ATTENTION for doing What you asked.





SECOND: Withhold Attention From The Behaviors You Do Not Want.

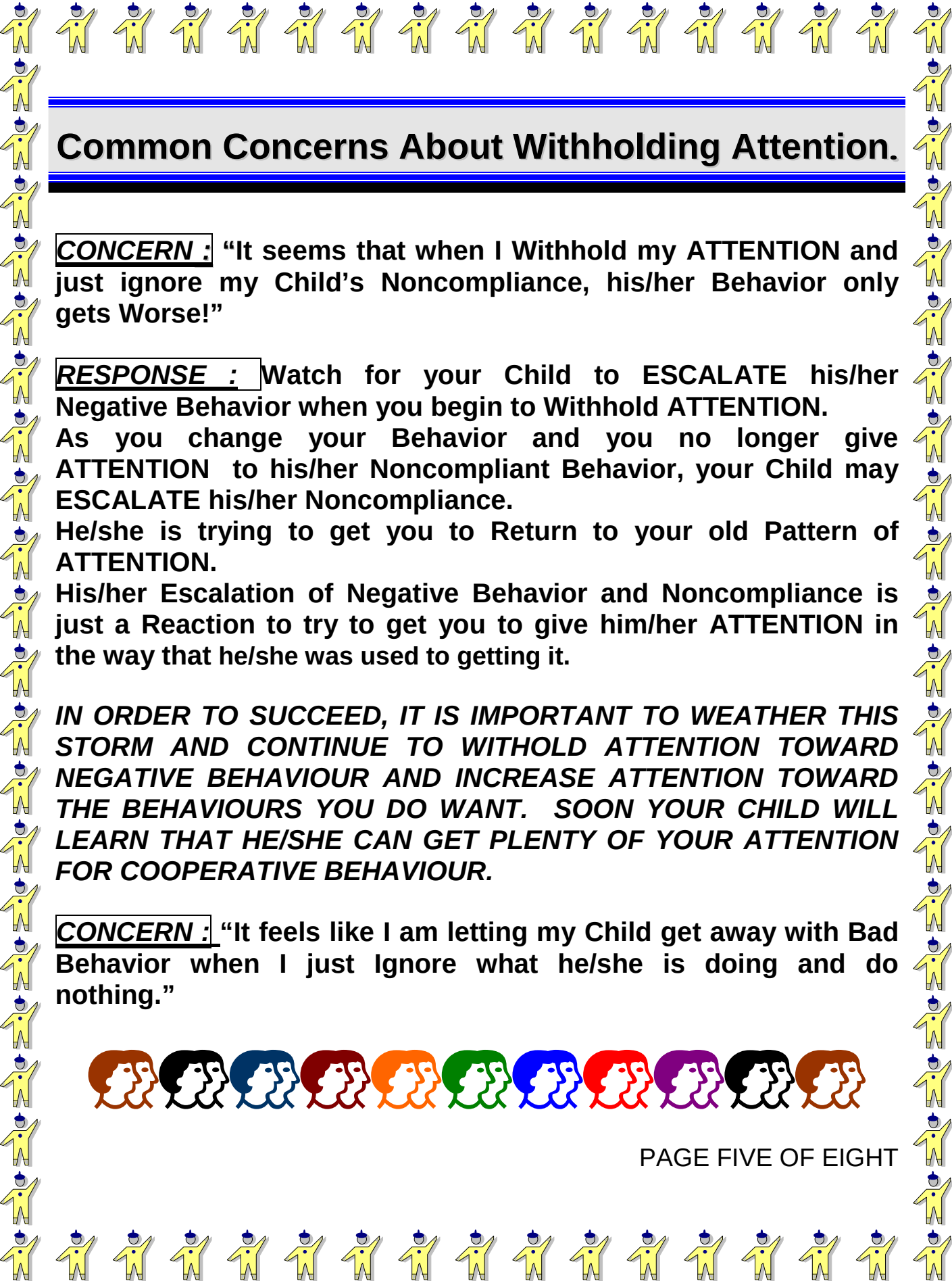
When your Child is engaged in Uncooperative Behavior, RESIST Reinforcing that Behavior.

WITHOLD ATTENTION toward any Uncooperative Behavior!

TIPS--to Help you WITHOLD ATTENTION During Uncooperative Behavior: -

- 1. Avoid Eye Contact Or Turn Away From Your Child During Uncooperative Behavior.**
- 2. When Possible, Remove Yourself Physically From the Situation.**
- 3. Watch Your Voice Tone To Eliminate As Much Emotion As Possible From Your Tone Of Voice, If You Need To Comment On His/Her Uncooperative Behavior.**
- 4. Use Fewer Words When You Feel You Have To Make A Comment During Uncooperative Behavior.**
- 5. Remind Yourself That You Are Succeeding In Shaping His/Her Behavior, If You Ignore The Un-cooperation, Even If S/He Continues That Uncooperative Behavior At This Stage.**





Common Concerns About Withholding Attention.

CONCERN : “It seems that when I Withhold my ATTENTION and just ignore my Child’s Noncompliance, his/her Behavior only gets Worse!”

RESPONSE : Watch for your Child to ESCALATE his/her Negative Behavior when you begin to Withhold ATTENTION.

As you change your Behavior and you no longer give ATTENTION to his/her Noncompliant Behavior, your Child may ESCALATE his/her Noncompliance.

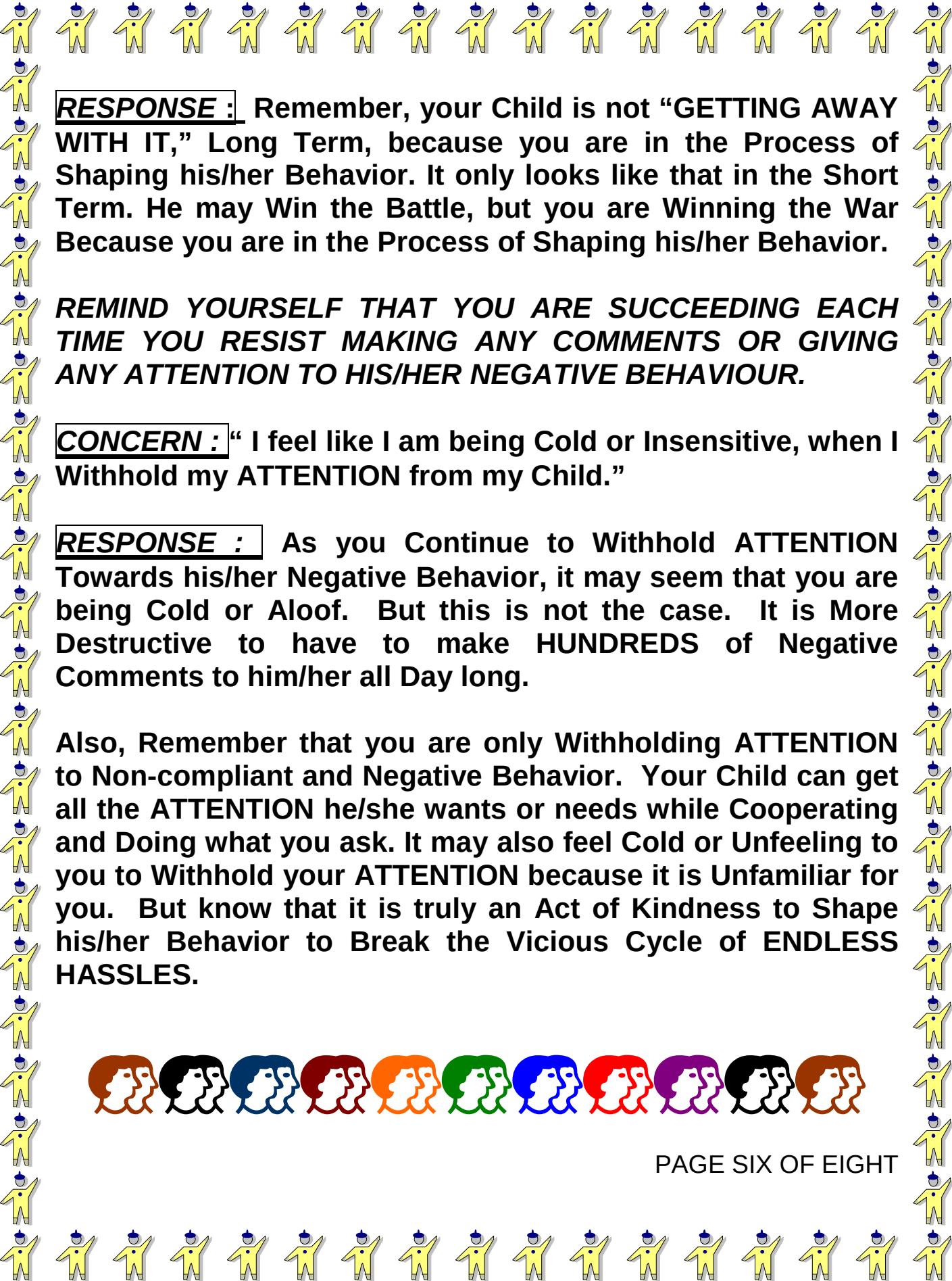
He/she is trying to get you to Return to your old Pattern of ATTENTION.

His/her Escalation of Negative Behavior and Noncompliance is just a Reaction to try to get you to give him/her ATTENTION in the way that he/she was used to getting it.

IN ORDER TO SUCCEED, IT IS IMPORTANT TO WEATHER THIS STORM AND CONTINUE TO WITHOLD ATTENTION TOWARD NEGATIVE BEHAVIOUR AND INCREASE ATTENTION TOWARD THE BEHAVIOURS YOU DO WANT. SOON YOUR CHILD WILL LEARN THAT HE/SHE CAN GET PLENTY OF YOUR ATTENTION FOR COOPERATIVE BEHAVIOUR.

CONCERN : “It feels like I am letting my Child get away with Bad Behavior when I just Ignore what he/she is doing and do nothing.”





RESPONSE : Remember, your Child is not “GETTING AWAY WITH IT,” Long Term, because you are in the Process of Shaping his/her Behavior. It only looks like that in the Short Term. He may Win the Battle, but you are Winning the War Because you are in the Process of Shaping his/her Behavior.

REMINDE YOURSELF THAT YOU ARE SUCCEEDING EACH TIME YOU RESIST MAKING ANY COMMENTS OR GIVING ANY ATTENTION TO HIS/HER NEGATIVE BEHAVIOUR.

CONCERN : “ I feel like I am being Cold or Insensitive, when I Withhold my ATTENTION from my Child.”

RESPONSE : As you Continue to Withhold ATTENTION Towards his/her Negative Behavior, it may seem that you are being Cold or Aloof. But this is not the case. It is More Destructive to have to make HUNDREDS of Negative Comments to him/her all Day long.

Also, Remember that you are only Withholding ATTENTION to Non-compliant and Negative Behavior. Your Child can get all the ATTENTION he/she wants or needs while Cooperating and Doing what you ask. It may also feel Cold or Unfeeling to you to Withhold your ATTENTION because it is Unfamiliar for you. But know that it is truly an Act of Kindness to Shape his/her Behavior to Break the Vicious Cycle of ENDLESS HASSLES.



CONCERN : “But I cannot just Ignore him/her, when s/he does not do what I ask, because I have to go to Work on Time.”

RESPONSE : In the TRAINING PROGRAM in PART TWO, you will have an Opportunity to Create Situations where it is Possible for you to Ignore Noncompliance so that you can Acquire the TECHNIQUES to train your Child to LISTEN and DO what you ASK.

However, right now, before you have had an Opportunity to start the TRAINING PROGRAM, if you get Caught in SITUATIONS where you have a DEADLINE that Cannot Be Ignored---TAKE DIRECT ACTION.

For example, if you say, “*BRETT, PLEASE PUT ON YOUR JEANS AND SHIRT, WE NEED TO LEAVE IN A FEW MINUTES.*” And your Child continues to fool around and he is still in his pajamas when you need to leave, TAKE DIRECT ACTION: -

Pick Up Your Child’s Clothes,
Take Your Child By The Arm,
And Lead Him To The Car,
With As Little Emotional Reaction
And As Few Words As Possible.



YOU ARE REDUCING THE QUANTITY AND QUALITY OF REINFORCING ATTENTION TOWARD THE NEGATIVE BEHAVIOUR WHEN YOU TAKE DIRECT ACTION AND ELIMINATE YOUR EMOTIONAL REACTIONS. AND THAT IS SUCCESS AT THIS STAGE!

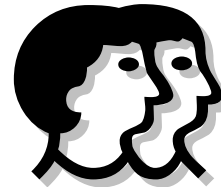


NOW ON TO PART TWO

PAGE EIGHT OF EIGHT



Part Two



The Training Program.

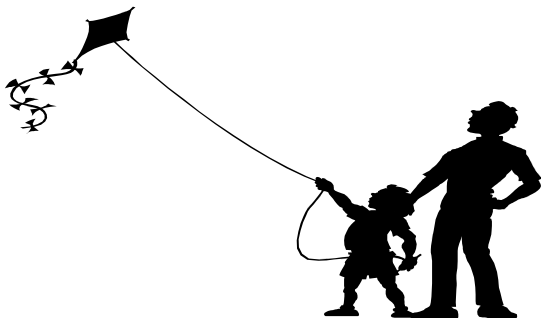
Why Is A Training Program Necessary?

Giving ATTENTION to Cooperative Behavior and Withholding said ATTENTION During Uncooperative Behavior, will WORK to get more Cooperative Behavior in General.

However, as you probably have experienced, one of the biggest PROBLEMS, is still getting your Child to Do what you Ask, especially in Troublesome Areas, such as Getting Ready For School or Going To Bed.

That is why a STEP-BY-STEP Training Program is so IMPORTANT in Addition to Reinforcing Cooperative Behavior in General Ways. In the Training Program that follows, you will learn how to Set Up Situations, where you have a Chance to TRAIN your Child to Do what you Ask.

The idea of ADDING a Training Program on Top of a BUSY SCHEDULE with many Responsibilities may seem like another HASSLE at First. But when you consider the TIME you now SPEND trying to get your Child to Do what you Ask, it is well WORTH Investing that TIME and ENERGY in the Training Program.



**Both You And Your Child
Will Be a Lot Happier With
The Results.**



PAGE ONE OF SIX.

Overview Of The Training Program.

FIRST:



You will Practice **THREE SKILLS** that Work like Magic to get the kind of Behaviors you want.

MAKE REQUESTS in such a way that it will Encourage your Child to Comply.



1st.

GIVE ATTENTION in Additional Ways that will Powerfully Reinforce Compliance.



2nd.

WITHHOLD ATTENTION for Noncompliance in order to Eliminate the Noncompliant Behavior that you Do not want.



3rd.

AND THEN:



You will Learn How to **PRACTICE** these **THREE SKILLS** while you make Requests at **THREE LEVELS OF DIFFICULTY.**



The Three Skills Necessary To Begin The TRAINING PROGRAM.

FIRST SKILL:



1st.

LEARN HOW TO MAKE A REQUEST.

Say your Child's Name.

Look your Child in the Eye.

Touch your Child (on Arm or Shoulders).

Make your Request (Speaking Slowly).

Ask your Child to Return to you after s/he has completed the Request.



EXAMPLES:



1) "John," (looking him in the Eyes, Touching him), "there is a Magazine on my Bed, would you Please bring it to me?"

2) "Jenny," (looking her in the Eyes, Touching her), "Please go and put this Book by the Front Door, so that I will remember to take it with me Tomorrow. Come back and let me know that you have Put it there."

3) "Mark," (looking him in the Eyes, Touching him), "Please go and ask Daddy if he will be ready for Dinner in 10 minutes. Come back and tell me what he says."

REMEMBER:

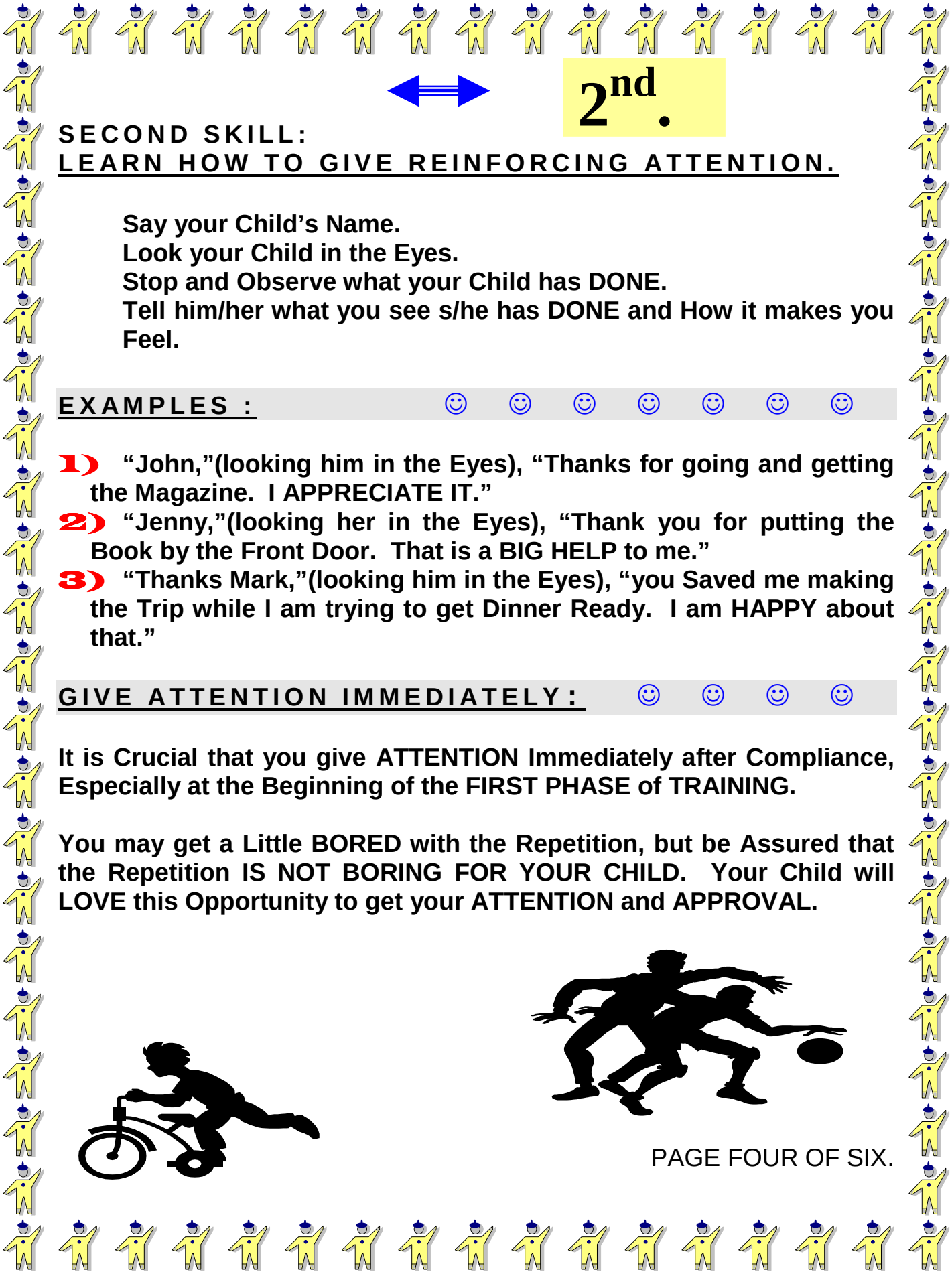


Make a Request when your Child is Close By and not Engrossed in an Attractive Activity.

When you say your Child's Name and Touch him/her, it helps your Child to be more Aware of your Request. This is Very Important in the Beginning of TRAINING, but as Compliance Increases, you can vary the Frequency of Adding "Touch" to your Request.

It may seem Awkward for you to ask your Child to return to you. However, this serves to Remind you to Reinforce his/her Compliance.

PAGE THREE OF SIX.

A decorative border of yellow stick figures with blue hats and arms, arranged in a rectangular frame around the page content.

2nd.

SECOND SKILL: **LEARN HOW TO GIVE REINFORCING ATTENTION.**

Say your Child's Name.

Look your Child in the Eyes.

Stop and Observe what your Child has DONE.

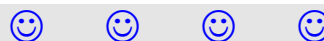
Tell him/her what you see s/he has DONE and How it makes you Feel.

EXAMPLES :



- 1)** "John,"(looking him in the Eyes), "Thanks for going and getting the Magazine. I APPRECIATE IT."
- 2)** "Jenny,"(looking her in the Eyes), "Thank you for putting the Book by the Front Door. That is a BIG HELP to me."
- 3)** "Thanks Mark,"(looking him in the Eyes), "you Saved me making the Trip while I am trying to get Dinner Ready. I am HAPPY about that."

GIVE ATTENTION IMMEDIATELY :



It is Crucial that you give ATTENTION Immediately after Compliance, Especially at the Beginning of the FIRST PHASE of TRAINING.

You may get a Little BORED with the Repetition, but be Assured that the Repetition IS NOT BORING FOR YOUR CHILD. Your Child will LOVE this Opportunity to get your ATTENTION and APPROVAL.





3rd.

THIRD SKILL:

LEARN HOW TO WITHHOLD ATTENTION:

When your Child DOES NOT DO what you Ask, RESIST Making Any COMMENTS, or Giving Any REMINDERS.

IGNORE the Noncompliance and TRY Another REQUEST Later.

You have already been Practicing WITHHOLDING your ATTENTION Toward Uncooperative Behaviors. It is Crucial to Continue to WITHHOLD ATTENTION From Non-compliant Behavior, for the TRAINING PROGRAM to be a SUCCESS.

Do Not WORRY if you need to IGNORE a Great Deal of Noncompliance in the Beginning of TRAINING. Count the Number of Times that you get Compliance and Ignore the Times you Do Not. Soon you will see the Compliance Increasing and the Non-compliance Decreasing.



THE THREE LEVELS OF DIFFICULTY.

FIRST LEVEL OF DIFFICULTY :

In the FIRST LEVEL, the Requests that you will make are SIMPLE, ONE LEVEL Requests. It is Important at this Level, that you MAKE UP Requests that have NO Previous HASSLES Connected with them. The Sole Purpose of these Contrived Requests, is to give yourself and your Child a Chance to Begin the TRAINING PROGRAM, where you can have an Easy Time Practicing and Achieving success.

Also it is Important in the First Level, to make Requests when it is Possible to IGNORE any Noncompliance.

FIRST LEVEL Requests Ask your Child to:

Go Get Something.

Go Put Something Somewhere.

Go Ask Someone Something.



SECOND LEVEL OF DIFFICULTY:

SECOND LEVEL Requests are also SIMPLE, ONE PART Requests, but they Have a History of Being a HASSLE, such as Requests to: -

Put your Shoes On.

Eat your Food.

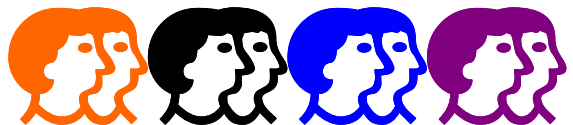
Pick up your Toys.

THIRD LEVEL OF DIFFICULTY:

THIRD LEVEL Requests Involve more COMPLEX Behaviors that Have MULTIPLE PARTS and Also Have a History of Being a HASSLE, for example Requests to: -

Get Ready for Bed.

Get Ready for School.





PRACTICE ONE



THE FIRST LEVEL OF DIFFICULTY—{D-1}.

Remember to **CHOOSE** Times to make Requests when you can **IGNORE** Non-compliance and when your Child is not Engrossed in Another Competing Activity.

Make up Requests for the Sole Purpose of Beginning the **TRAINING PROCESS**. Ask your Child to Run an **ERRAND** to: -

1. Go Get Something.
2. Go Put Something Somewhere.
3. Go Tell Someone Something.



Stand **CLOSE** to your Child and **REMEMBER** to **USE** all 5 **STEPS** of the Request **SKILL** and then **ADD** the 4 **STEPS** of **IMMEDIATE REINFORCEMENT**. You will find **EXAMPLES** on the Next Few Pages, to **HELP** you Get **STARTED**.

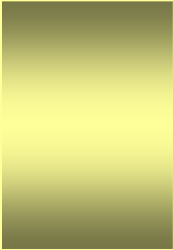
GIVE ATTENTION WHENEVER YOU GET COMPLIANCE EVEN IF IT'S LATER.

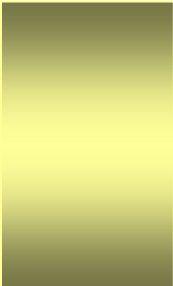
Give **ATTENTION** if s/he **DOES** what you have Asked, no Matter **WHEN** s/he **DOES** it---**EVEN** if it is **MUCH LATER** than When you Asked it. It Does Not Matter how Quickly your Child **RESPONDS** in the Beginning of **TRAINING**.

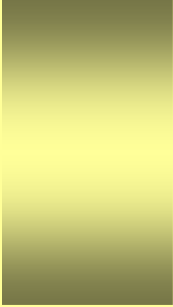
Jump at **ANY CHANCE** to Give her/him **ATTENTION** for **DOING** what you Asked, Regardless of how **SLOWLY** s/he **RESPONDS** at this **STAGE** of the **TRAINING**.



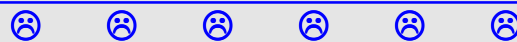
**EXAMPLES OF REQUESTS TO:
GO GET SOMETHING.**

 "Mary,"(Looking in her Eyes and Touching her), "my Pen rolled under the Couch, can you FIND it and Give it to me ?" when Mary comes back, you say "Mary,"(Looking in her Eyes), "I SEE you Found the PEN. That is Great. Now I can make my List." IGNORE any Noncompliance and Try Again LATER.

 "Alisa,"(Looking her in the Eyes, Touching her), "could you GET the Roll of Paper Towels that I left in the Car and BRING it to me ?" When she comes back, you say, "Alisa,"(Looking in her Eyes), "I see you found the Paper Towels. I am HAPPY for your HELP." If you do not Get Compliance, just IGNORE the "miss" and Try Again LATER.

 "Heather,"(Looking in her Eyes, Touching her), "Please BRING me your Picture so that I can PUT it on the Refrigerator." When Heather Brings her Picture to you, you say, "Heather,"(Looking her in the Eyes), "What a great Picture ! Thanks for getting it for me. I am GLAD you Saved it." If you do not Get Compliance, Resist making any Comments. You will Get more Compliance as you Practice.

DO NOT GET DISCOURAGED.



It may Take Several Different Requests Before you Get Compliance. You are Eliminating ONE HABIT and Replacing it with ANOTHER and this Takes TIME and ENDURANCE. This is TRUE for your Child as well as for YOURSELF. The First Day you may only Get Compliance for 3 out of 10 Requests. Tomorrow you may Get 5 out of 10, so do not be Concerned about the "misses". You will Get More and More Compliance as you PRACTICE.

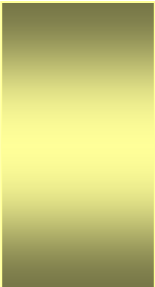


PAGE TWO OF FOUR

**EXAMPLES OF REQUESTS TO:
GO PUT SOMETHING SOMEWHERE.**



“Mark,”(Looking him in the Eyes, Touching him), “Would you please PUT the Dog’s Lease on the Back Door Knob. Come Back and Let me know you DID it.” When Mark comes Back, you say, “Thanks, Mark.”(Looking him in the Eyes). “I am ALWAYS HAPPY for your HELP. Now we can FIND it when we are READY to take him out for a WALK.” Remember to RESIST Paying any ATTENTION to Noncompliance.



“Tanya,”(Looking her in the Eyes, Touching her), “Would you Please PUT this Section of the Newspaper on Daddy’s Desk. Come and TELL me you DID it.” When Tanya comes Back, you say, “Tanya,”(Looking her in the Eyes), I SEE that you are a FAST ERRAND Girl. Thanks for your HELP.” Continue to RESIST Paying ATTENTION to Noncompliance.



“Ashley,”(Looking her in the Eyes, Touching her), “Would you Please PUT this BOX out on the Shelf in the Garage next to the Big Green Box. Come Back and TELL me if there was Room for it.” When Ashley Comes Back, you say, “Ashley,”(Looking her in the Eyes), I SEE you Found Room for that BOX. Thanks for PUTTING it Away for me.” If she DOES NOT Comply, IGNORE, Try Again Later.

TAKE YOUR TIME.

Give your Child a Good FOUNDATION in this FIRST LEVEL before Proceeding to the SECOND LEVEL. PRACTICE making Requests at this LEVEL UNTIL your Child Listens Consistently and Follows your Directions on These SIMPLE Requests. It is Important NOT to MOVE on to the More Difficult Requests in the SECOND LEVEL until you Have Achieved SUCCESS at this level.



**EXAMPLES OF REQUESTS TO:
GO TELL SOMEONE SOMETHING.**

“John,”(Looking him in the Eyes, Touching him), “Would you Please GO OVER to Mr. Johnson’s House and TELL him that I will be Over to GET Sam a 6.30pm. Come Back and TELL me what he says.” When John Comes Back, you say, “John,”(Looking him in the Eyes), “I am so GLAD that you CAN RUN ERRANDS, it Allows us to Leave on Time. That is a BIG HELP.” Remember to IGNORE Noncompliance and Try Another Request Later.

“Christie,”(Looking her in the Eyes,, Touching her), “Would you Please GO Ask Daddy if he wants Toast or a Bagel for Breakfast ?” When she Comes Back, you say, “Thanks Christie, (Looking her in the Eyes), I APPRECIATE your HELP.” Continue to IGNORE any Noncompliance.

“Jamie,”(Looking her in the Eyes, Touching her), “Would you Please GO TELL Lauren that I am Looking for her Lunch Box and I want her to BRING it to me. Come Back and Tell me what she says.” When Jamie Comes Back, you say, “Thanks Jamie,”(Looking he in the Eyes), for Checking with Lauren. I am GRATEFUL for your HELP.” You will Get More and More Compliance Each Day that You PRACTICE.

In the SECOND LEVEL, you will BEGIN to WORK on the BEHAVIOURS that are More DIFFICULT to RETRAIN Because they have RECEIVED More NEGATIVE ATTENTION in the Past. You and your Child WILL Have Greater SUCCESS Tackling these Requests, AFTER you Have RECEIVED Consistent COMPLIANCE with the SIMPLE FIRST LEVEL REQUESTS.

{TAKE YOUR TIME}





PRACTICE TWO



THE SECOND LEVEL OF DIFFICULTY—{D-2}

SHOES—FOOD—TOYS

In the SECOND LEVEL of DIFFICULTY, Requests are also SIMPLE ONE-STEP Requests, but They HAVE Some History of Being a HASSLE.

As much as Possible, Try to Make your Requests when you DO NOT Have Time Constraints. This Makes it Easier to IGNORE Noncompliance, Especially in the Beginning of TRAINING.

R—1 : Put Your Shoes ON.

Also, THINK AHEAD about Other BINDS, such as Putting Too Much Food On Your Child's Plate, or Allowing Too Many Toys On The Floor At One Time.

THINKING AHEAD will Enable you to PLAN Requests that make it Easier to GET Cooperation.

R—2 : Eat Your Food.

However, if in Spite of your Good Efforts, your Child DOES NOT Comply and if Time Constraints Necessitate that you CANNOT IGNORE Noncompliance, CALMLY TAKE an ACTION you THINK is APPROPRIATE.

R—3: Pick Up Your Toys.

Express as LITTLE EMOTION as Possible. Know that you are SUCCEEDING in spite of the “miss.” If you stay CALM and AVOID Expressing Excess EMOTION and REFRAIN From ADDING any Unnecessary COMMENTS—you are GIVING Less ATTENTION to Noncompliance—and that IS SUCCESS on your Part.

Be Sure to Use All 5 STEPS (Page 19) when Making a Request and All 4 STEPS (Page 20) when Reinforcing Compliance.

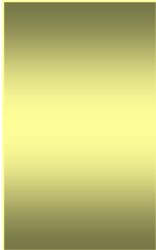
EXAMPLES Follow on the Next Page.

PAGE ONE OF FOUR



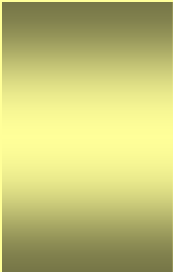
A decorative border of yellow stick figures with blue hats and arms, arranged in a rectangular frame around the page content.

EXAMPLE ONE [1]: PUT YOUR SHOES ON.

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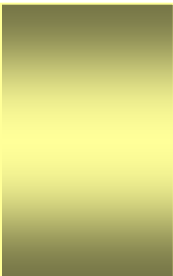
“Jon,”(Looking in his Eyes and Touching Him), “Please GET your Shoes On. Show me when you have GOT them On.” If you GET Compliance, say, “Jon,”(Looking him in the Eye), I am HAPPY that you CAN GET your Shoes On when I Ask you.”

EXAMPLE TWO [2]: EAT YOUR SANDWICH.

A solid yellow square.

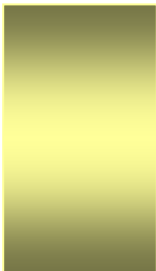
“Jenny,”(Looking in her Eyes and Touching her), “Please Eat your Lunch. TELL me when you are Finished.” If your Child says, “I am Finished.” Or “I CANNOT Eat any More.” Then say, “Jenny, (Looking in her Eyes), I SEE you ATE your Toast. That is Great.”

EXAMPLE THREE [3]: PICK UP YOUR TOYS.

A solid yellow square.

“Mary,”(Making Eye Contact and Touching her), Please PICK UP your Toys and PUT them On the Shelf. Let me Know when you HAVE PUT them Away.” If your Child TELLS you that she HAS them ALL On the Shelf, say her NAME, Look her in the Eyes, TAKE a Few STEPS Toward the Shelf and say, “The Toys look Great there. Thank you. I am HAPPY you Could DO that.”

EXAMPLE FOUR [4]: PUT ON YOUR PLAY CLOTHES.

A solid yellow square.

“Ryan,”(Looking him in his Eyes, Touching him), “Please PUT your Play Clothes ON. Come and SHOW me when you GET them ON.” When Ryan Comes Back and SHOWS you, say, “Ryan,”(Looking him in the Eye), “I am GLAD you CAN GET your Play Clothes ON so Quickly.”



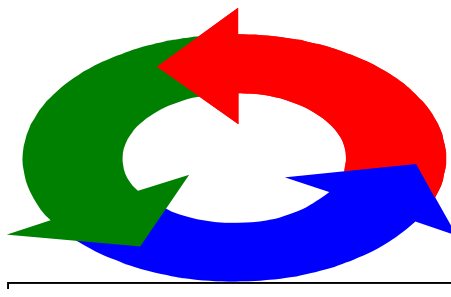


REMEMBER



1. **SECOND LEVEL** Requests Have a History of Being a **HASSLE**, so **DO NOT GET** Disappointed if you **GET** More Noncompliance in the Beginning. Continue to **PRACTICE** making Requests Several Times a Day for a Few Weeks and soon you will **SEE** that you will **GET** More and More Compliance.
2. **STOP** and **OBSERVE** your Child. **COMMENT** On what you **SEE** your Child has **DONE** and/or **HOW** you **FEEL** About what s/he Has **DONE**. Your Child Really wants to **KNOW** that s/he **HAS PLEASSED** you.
3. Stay on this **LEVEL** until your Child has **LEARNED** to **LISTEN** and **FOLLOW** your **DIRECTIONS** Consistently.

Shoes—Food—Toys



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PAGE FOUR OF FIVE



PRACTICE THREE



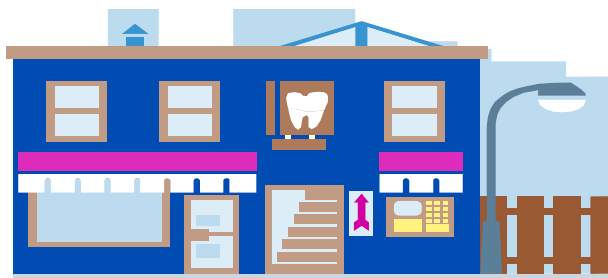
THE THIRD LEVEL OF DIFFICULTY—[D-3]

SCHOOL—BED—ROOM

After your Child has LEARNED to DO the SIMPLE ONE-STEP Requests of the FIRST and SECOND LEVELS of DIFFICULTY, you are Ready to TACKLE the COMPLEX and TROUBLESOME Requests of the THIRD LEVEL.

Requests in the THIRD LEVEL are Made Up of SEVERAL STEPS, but Spoken as if they Had Only a SINGLE STEP, such as Requests Asking your Child to:

- 1 GET Ready for School.
- 2 GET Ready for Bed.
- 3 CLEAN Up your Room.



These MULTIPLE PART Requests are ONES that Have Continually Exasperated you and your Child. These TROUBLESOME Requests REQUIRE that you DIVIDE them into SEVERAL SEPARATE TASKS as INDIVIDUAL Requests.

Then ADD TWO TASKS TOGETHER, Spoken as ONE Request. After MANY WEEKS, GROUP SEVERAL TASKS TOGETHER and Present them as ONE SINGLE Request that our Child CAN ACCOMPLISH.



EXAMPLES Follow On The Next Page.



EXAMPLE ONE [1]: GET READY FOR SCHOOL.

DIVIDE this Request INTO at Least THREE {3} or FOUR {4} PARTS: -
{1} GET DRESSED. {2} EAT BREAKFAST.
{3} GATHER THINGS TO TAKE. {4} GET IN THE CAR.

After your Child Has LEARNED to Comply with EACH SEPARATE Request, you CAN COMBINE TWO Requests, Such as, "It is Time to GET DRESSED and EAT BREAKFAST," or "It is Time to Get your THINGS and GET In the CAR."

Finally, After a LOT of SUCCESS, you CAN ADD them ALL TOGETHER as ONE Request, "It is Time to GET READY for SCHOOL."

EXAMPLE TWO [2]: GOING TO BED,

DIVIDE INTO THREE {3} or EVEN FOUR {4} PARTS as per your Nightly Routine :-

{1} BATHROOM (Bath, Teeth, Pajamas) {2} SHARING TIME (Reading)
{3} CHECKING TIME (Water, Toilet, Light, Door) {4} GET INTO BED.

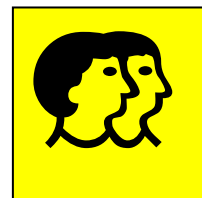
After your Child Has LEARNED to Comply with EACH SEPARATE PART, COMBINE the Requests INTO ONE Request, "Okay, Todd, it is Time for Bed."

Both of you will LOVE to Have a HAPPY Nightly Ritual, without the Old TUG-OF-WAR HASSLES. You Can Eliminate these HASSLES GRADUALLY after Each PART has Received a LOT OF ATTENTION for Compliance.

EXAMPLE THREE {3}: CLEAN UP YOUR ROOM.

DIVIDE INTO at Least THREE PARTS: -

{1} PICK UP TOYS. {2} PUT AWAY CLOTHES.
{3} MAKE THE BED.



After you Have Achieved SUCCESS with EACH PART, you Can COMBINE THEM INTO ONE Request. "Mary, Please Clean Up your ROOM."



REMEMBER



1. Make Sure that your Child COMES and Asks you to CHECK what s/he Has DONE, so that you GET a CHANCE to GIVE her/him Lots of ATTENTION. COMMENT On what you SEE s/he Has Done and How you FEEL About it.
2. If you GET a LOT of Noncompliance when you FIRST PUT the SEPARATE Requests TOGETHER into ONE BIG Request—you NEED to SPEND More Time with the INDIVIDUAL Requests Before TRYING to COMBINE them INTO ONE COMPLEX Request.
3. As you BEGIN to Achieve More and More Compliance in the FIRST LEVELS, Remember that these HASSLES Have Had Years Of Reinforcement. It is a HUGE SUCCESS to Turn the Tide and Achieve Compliance when you Consider the Negative Reinforcement that you are CHANGING. Getting Consistent Compliance ON Some of those OLD HASSLES Can Take Many More WEEKS. GIVE yourself and your Children PLENTY of TIME to LEARN these NEW SKILLS.
4. HANG IN THERE and DO NOT GIVE UP. It is WELL WORTH your TIME and EFFORT. It Takes a Great Deal of PATIENCE and ORGAIZATION on your PART to TRAIN your Children, but the BENEFITS will LAST a LIFETIME.
5. YOU WILL ALL BE A LOT HAPPIER. Your Children will LEARN that it FEELS a LOT BETTER to GET your HAPPY and POSITIVE ATTENTION for what they Have DONE than to GET your NEGATIVE ATTENTION for NOT DOING what you Ask. You and your Children will Have a CHANCE to ENJOY your RELATIONSHIP with Each Other as you BREAK the CYCLE of NO-WIN HASSLES.





APPENDIX



PARENTING IS EASIER WHEN BOTH PARENTS WORK TOGETHER.

TRY TO: -

1. AGREE NOT TO DISAGREE.

Decide on what **VALUES** you want to **TEACH** and How to **TEACH** them.

It is **IMPORTANT** to: -

- (a) **SHARE DISCIPLINE DUTIES** (so that One Parent is not seen as the Bad Guy.)
- (b) **AVOID OVERULING EACH OTHER.** Resolve any Disagreements out of your Child's Hearing.
- (c) **NEVER USE THREATS** (such as Wait until your Mother gets Home)

2. DIVIDE THE WORK.

Being a **PARENT** is a **BIG JOB**. Two **HEADS**—and **ANOTHER PAIR** of **HANDS**—are Usually Better than **ONE**. But **REMEMBER** to Set Aside Time for **ACTIVITIES** you and your Child can **DO ALONE**.

3. SUPPORT YOUR PARTNER.

Ask your **PARTNER** to **SUPPORT** you too. **TALK** to Each Other about **CONCERNS** and **PROBLEMS**. For Example, if your **PARTNER** seems **JEALOUS** about your **SPENDING TIME** with your Child, **TALK** It **OVER**.



CARE FOR YOURSELF!

Your Family Deserves Attention –But So Do You!

WORK THROUGH YOUR EMOTIONS.

Difficult Emotions are especially common after a Loss or Separation.

- (a) Do not Ignore or Hide your Feelings—Try to Accept and Understand them.
- (b) If your Emotions Seem Overwhelming, Seek Professional Counseling.

LEARN TO HANDLE STRESS.

The Demands of Job and Home often leave Little Time for Personal Pursuits.

- (a) Sets Aside TIME to DO Things you enjoy.
- (b) Talking With a FRIEND often makes PROBLEMS Seem Smaller.

PRACTICE GOOD HEALTH HABITS.

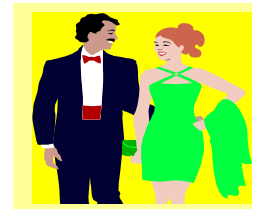
This is Essential to Maintaining a High Energy Level and a Bright Outlook.

- (a) Eat a Balanced Diet. (b) Get Enough Rest.
- (c) Exercise Regularly. Get a Medical Exam Before you Begin Exercising.

KEEP IN TOUCH WITH FAMILY AND FRIENDS .

They can be a Great Source of Support and Understanding.

- (a) Spend Time with those you are Closest to.
- (c) Ask for Help with Child Care.



DO NOT NEGLECT YOUR SOCIAL LIFE.

Socializing makes Life more Enjoyable. It Can Make Everyday Problems Easier to Deal with.

- (a) Reassure your Children that you LOVE them, but that you NEED to be with Adults too.

SEEK HELP WHENEVER IT IS NEEDED.

Asking for HELP and ADVICE is a Sign of STRENGTH—not WEAKNESS.

- (a) Learn to Recognize Problems while they are still SMALL.
- (b) Do Not Hesitate to Ask for HELP. Your EMOTIONAL HEALTH Affects the WHOLE FAMILY.



THE ABC's OF DISCIPLINE



Be Firm But Fair.



(a) M A K E R U L E S

Be CLEAR about what TYPES of BEHAVIOUR are NOT OK. Make Sure the RULES Suit your Child's AGE. HAVE your Child HELP you WRITE them Down. POST the LIST IN your HOME.

(b) B E C O N S I S T E N T

ENFORCE the RULES you HAVE SET. Making LOTS of EXCEPTIONS Will CONFUSE your Child. He/she May BEGIN to FEEL ANXIOUS and INSECURE.

(c) D O N O T H I T

PHYSICAL PUNISHMENT DOES NOT TEACH RESPECT FOR RULES. It TEACHES your Child to be AFRAID of you. It MAY ALSO TEACH that VIOLENCE IS OKAY. And PHYSICAL PUNISHMENT Can Become TOO EASY a HABIT. If you are FEELING ANGRY or UPSET, Take TIME TO COOL OFF, before DISCIPLINING your Child.

(d) O F F E R Y O U R C H I L D A C H O I C E

This ENCOURAGES your Child to COOPERATE. For Example "It is Time for you to GO TO BED. Would YOU Like ME to READ you a STORY on the Couch OR After I Tuck you IN."

(e) T R Y T I M E — O U T S

When your Child MISBEHAVES, Make him/her SPEND Several MINUTES ALONE. It GIVES the Child a CHANCE to CALM DOWN and THINK About THE BEHAVIOR.

(f) P R A I S E G O O D B E H A V I O U R

Let your Child KNOW you APPRECIATE when HE/SHE IS WELL BEHAVED. Often, Encouraging GOOD BEHAVIOUR WORKS BETTER THAN CRITICIZING BAD BEHAVIOUR.

**HELP YOUR CHILD UNDERSTAND THAT YOUR LOVE
REMAINS UNCHANGED EVEN WHEN DISCIPLINE IS
NECESSARY.**



COMMUNICATION IS A KEY TO EFFECTIVE PARENTING.



(a) MAKE TIME TO TALK

Find Time in your BUSY DAY when you Can Give your Child your Full ATTENTION. Pick a Time that is GOOD for your Child Too. Take the OPPORTUNITY to EXPLORE what is Going On in your Child's LIFE.

(b) LISTEN

Pay ATTENTION to what your Child Has To SAY. Look For HIDDEN MESSAGES. For example, your Child May COMPLAIN "That Nobody Likes Him/Her," but your Child May Be UPSET Because a GOOD FRIEND Sat Next TO Another Child in the School Café.

(c) SHOW RESPECT

VALUE your Child's THOUGHTS and FEELINGS. DO NOT JUDGE, BLAME OR TEASE. Try to PUT yourself IN your Child's SHOES.

(d) BE HONEST

Explain your BELIEFS. Be DIRECT and TELL your Child WHAT you THINK. Help your Child UNDERSTAND your POINT of VIEW.

(e) BE A GOOD ROLE MODEL

YOUR CHILD LEARNS HOW TO ACT BY WATCHING YOU. Be the KIND of PERSON you WANT your Child TO BE. For Example: -

1. Show your LOVE and your Child Will Too.
2. Treat Others FAIRLY and your Child Will Too.
3. Approach PROBLEMS with a POSITIVE ATITUDE and your Child Will Too.
4. Show RESPECT for your Child and Others and your Child Will Show RESPECT for You and Others.

(f) BE WILLING TO LEARN FROM YOUR MISTAKES

There IS NO SUCH Thing as a PERFECT PARENT—OR the PERFECT CHILD. Admit it when you MAKE a MISTAKE. THINK ABOUT what you Could HAVE DONE DIFFERENTLY.

BRING OUT THE BEST IN YOUR CHILD

THESE QUALITIES MAY HELP YOUR CHILD TO BE MORE SUCCESSFUL.

1 . S E L F — E S T E E M

Your Child NEEDS to KNOW that he/she is a CAPABLE PERSON. Help your Child FEEL GOOD About ACCOMPLISHMENTS and ACCEPT—and LEARN From—FAILURE.

2 . I N D E P E N D E N C E

Children REMEMBER Things BETTER when they DISCOVER them On THEIR OWN. ALLOW your Child to TRY NEW Things that are REASONABLE for His/Her AGE and EXPERIENCE.

3 . S O C I A L S K I L L S

Help your Child LEARN To GET ALONG With OTHERS. TEACH Him/Her: -

- (a) GOOD MANNERS
- (b) HOW TO SHARE
- (c) HOW TO LISTEN
- (d) HOW TO RESPECT OTHERS NEEDS, OPINIONS, DIFFERENCES AND PROPERTY.

4 . A S E N S E O F R E S P O N S I B I L I T Y

DEVELOP this By INCLUDING your Child In HOUSEHOLD CHORES. For Example LET your Child be IN CHARGE of Setting the TABLE or Feeding the PET. Decide TOGETHER on the CONSEQUENCES of NOT Carrying Out Responsibilities.

5. A S E N S E O F H U M O R

SMILING and LAUGHTER are a HEALTHY Part of your Child's DEVELOPMENT. Tell JOKES and SILLY STORIES. Encourage your Child to FIND HUMOR in his/her Own ACTIONS.

EVERY CHILD IS DIFFERENT. ACCEPT YOUR CHILD AS AN INDIVIDUAL .



BEHAVIOUR PROBLEMS CAN BE A NORMAL PART OF GROWING UP

USE THEM AS OPPORTUNITIES TO TEACH YOUR CHILD
RIGHT FROM WRONG. HERE ARE SOME WAYS TO HANDLE
A FEW: -

1 . T E M P E R T A N T R U M S

Keep your COOL. Walk AWAY if you CAN DO so SAFELY. Or TAKE your Child to Another ROOM. DO NOT REWARD your Child with your ATTENTION.

2 . L Y I N G

Let your Child Know that you are AWARE that he/she is NOT TELLING the TRUTH. Instead of GIVING HARSH PUNISHMENT, Try To Understand Why your Child LIED. Explain WHY TELLING the TRUTH is IMPORTANT.

3 . C H E A T I N G

MAKE IT CLEAR that CHEATING IS ALWAYS WRONG—At School and At Play. Cheating Can Be the RESULT of TOO MUCH COMPETITION. TALK to your Child and FIND out if he/she FEELS PRESSURED To Do WELL. Help your Child UNDERSTAND the IMPORTANCE of BEING FAIR.

4 . S T E A L I N G

DO NOT ASK your Child Whether he/she Has STOLEN Something. This Might GIVE your Child An OPPORTUNITY to LIE. Instead, SHOW your Child that STEALING IS WRONG. INSIST that your Child RETURN the STOLEN ITEM and APOLOGIZE For his/her ACTION.

DISCIPLINE YOUR CHILD WITH LOVE
GET HELP IF PROBLEM BEHAVIOUR CONTINUES.





Children Live What They Learn.

The Child Who Lives With Criticism
Learns To Condemn.
The Child Who Lives With Hostility
Learns To Fight.
The Child Who Lives With Ridicule
Learns To Be Shy.
The Child Who Lives With Shame
Learns To Feel Guilty.
The Child Who Lives With Tolerance
Learns To Be Patient.
The Child Who Lives With Encouragement
Learns To Be Confident.
The Child Who Lives With Praise
Learns To Appreciate.
The Child Who Lives With Fairness
Learns To Be Just.
The Child Who Lives With Security
Learns To Have Faith.
The Child Who Lives With Approval
Learns To Like Themselves.
The Child Who Lives With Acceptance And
Friendship
Learns To Find Love In The World.

--Author Unknown--.



In Memory Of Pearl Leontine Berment – 13/10/20---18/11/99.

A PARENT'S PRAYER.
All I Ask Of You.

All I Ask Of You
Is Forever To
Remember Me
As Loving You

Can You Hear Their Cry
From Deep Within?
Laughter, Joy And
Presence,

Deep The Joy Of Being
Together
In One Heart
And For Me That's Just
Where It Is

The Only Gifts You Are!
Have You Time?
I'd Like To Be With You.

As We Make Our Way
Through
All The Joys And Pain
Can We Sense Our
Younger,
Truer Selves?

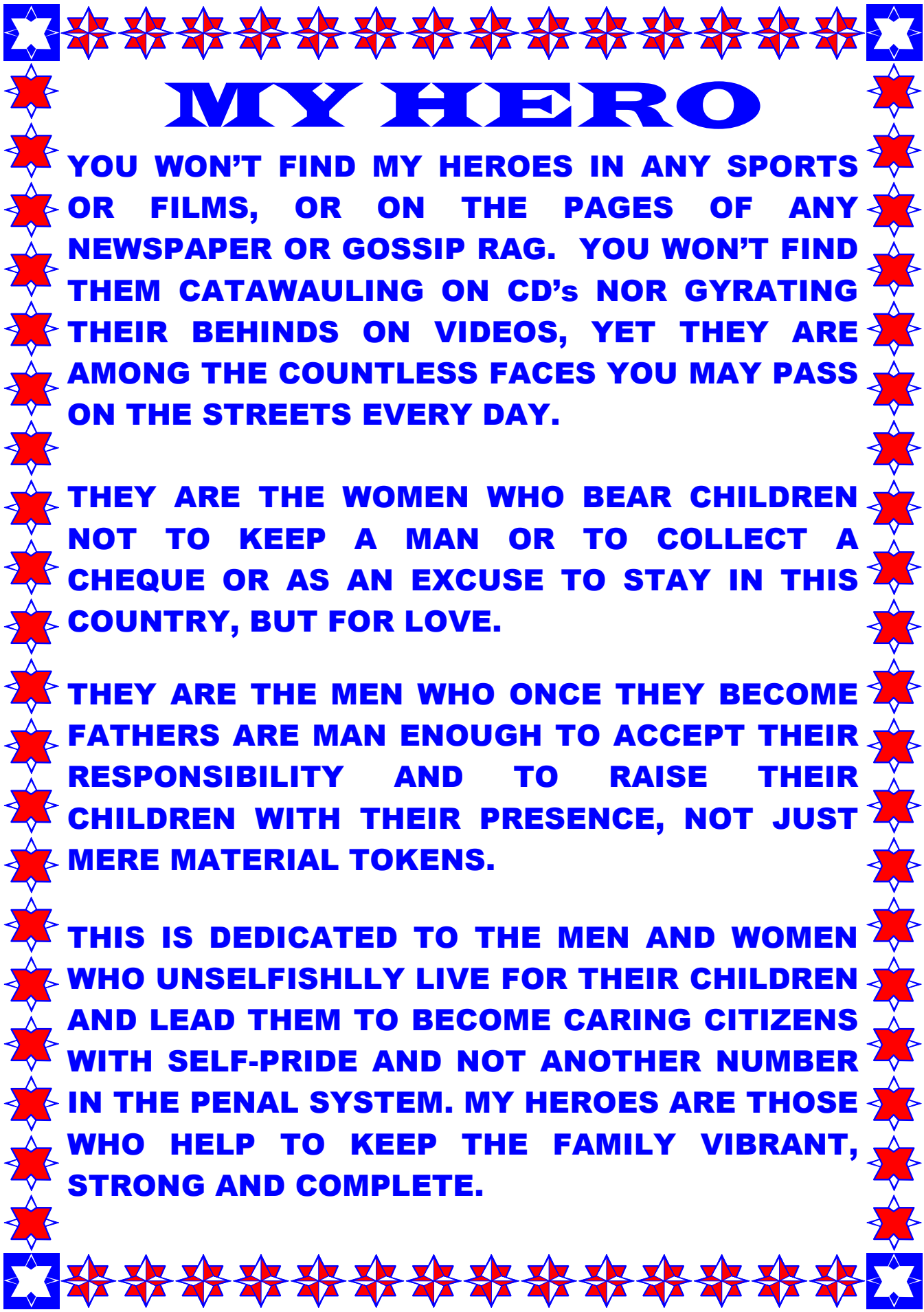
Persons Come Into The
Fibre Of Our Lives
And Their Shadow
Fades And
Disappears.

Someone Will Be
Calling You
To Be There For A While

But All I Ask Of You
Is Forever To
Remember Me
As Loving You,
Forever As Loving You.



**MOM
&
DAD
2001**



MY HERO

**YOU WON'T FIND MY HEROES IN ANY SPORTS
OR FILMS, OR ON THE PAGES OF ANY
NEWSPAPER OR GOSSIP RAG. YOU WON'T FIND
THEM CATAWAULING ON CD's NOR GYRATING
THEIR BEHINDS ON VIDEOS, YET THEY ARE
AMONG THE COUNTLESS FACES YOU MAY PASS
ON THE STREETS EVERY DAY.**

**THEY ARE THE WOMEN WHO BEAR CHILDREN
NOT TO KEEP A MAN OR TO COLLECT A
CHEQUE OR AS AN EXCUSE TO STAY IN THIS
COUNTRY, BUT FOR LOVE.**

**THEY ARE THE MEN WHO ONCE THEY BECOME
FATHERS ARE MAN ENOUGH TO ACCEPT THEIR
RESPONSIBILITY AND TO RAISE THEIR
CHILDREN WITH THEIR PRESENCE, NOT JUST
MERE MATERIAL TOKENS.**

**THIS IS DEDICATED TO THE MEN AND WOMEN
WHO UNSELFISHLY LIVE FOR THEIR CHILDREN
AND LEAD THEM TO BECOME CARING CITIZENS
WITH SELF-PRIDE AND NOT ANOTHER NUMBER
IN THE PENAL SYSTEM. MY HEROES ARE THOSE
WHO HELP TO KEEP THE FAMILY VIBRANT,
STRONG AND COMPLETE.**



Men Against Violence Against Women

Email: mavawsec@yahoo.com Website: <http://www.mavaw.com>



M.A.V.A.W. Goals



- 1)** Inform MEN about our CONCEPT, which is, that the PRIMARY VIOLENCE being committed Against WOMEN is a PSYCHOLOGICAL One, in that MOST MEN have not Accepted WOMEN as EQUAL, Together with Appreciating Them as DIFFERENT.
- 2)** Provide in the First Instance, for EDUCATION and TRAINING of all our MEMBERS and Well Wishers and in the Second Instance, on Request.
- 3)** Locate, Identify and Register, All MEN in Solidarity with our CAUSE, both in CONCEPT and these GOALS, offering them participation in M.A.V.A.W., which is one of the PROACTIVE ways to take RESPONSIBILITY for MALE VIOLENCE and also which will CONTRIBUTE to CREATING a Violent Free Society.
- 4)** Conduct Research generally and Needs Analysis where possible, on the Incidence and Intensity of VIOLENCE IN RELATIONSHIPS, with an Emphasis on DOMESTIC VIOLENCE dedicating ourselves to Reducing and eventually Eliminating, Unacceptable Violence in Society, using a Multi-disciplinary approach, focussing on Correcting Behaviour Skill and Belief System Deficits.
- 5)** Initiate and/or Engage in Social Activism, in order to push Existing and Emerging Societal Problems with Violent Content, TOWARDS Gender Sensitive Social and Educational Solutions.
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- 7)** Affiliate With and/or Work alongside, all other Non-Governmental Groups/Organisations, Civil Society and Governments, who share with us, this Common Goal of Reducing and Eventually Eliminating VIOLENT BEHAVIOUR, in and from our Society.
- 8)** Host when Possible and Attend when Invited, Public Meetings, Seminars, Symposiums, Workshops, Consultations, Conferences etc., both Locally and Internationally.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

LET US BUILD A PEACEFUL SOCIETY
By David Law.

WHEN MEN AND WOMEN DO NOT UNDERSTAND THE POWER OF THE EQUATION
SUBTRACTION WILL ALWAYS BE A DISTRACTION
SUPERIORITY MORE OFTEN THAN NOT BREEDS INSECURITY
PLEASE LET US BUILD A PEACEFUL SOCIETY.

WHEN FAMILY VALUES ARE NOW AN ENDANGERED SPECIES
DOMESTIC VIOLENCE STATISTICS JUST A SERIES IN AN EVOLVING MORASS
FORGET THE RACE, JUMP OUT OF YOUR CLASS
LET US BUILD A PEACEFUL SOCIETY.

WHEN SOME OF OUR CHILDREN ARE HOLDING THIS NATION TO RANSOM
CRIME DRUGS VIOLENCE JUVENILE DELINQUENCY MAY NOT GO AWAY EASILY
BLAME IT ON PARENTAL FAILURES, POLITICAL MISERIES
STILL LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR WOMENFOLK ARE TOKENLY HONOURED AND APPRECIATED
GENDER INBALANCES ARE IMPREGNATED IN OUR CULTURAL PSYCHE
DISMANTLE ALL BARRIERS, ADOPT AN ALL INCLUSIVE PHILOSOPHY
SO WE CAN BUILD A PEACEFUL SOCIETY.

WHEN POVERTY KNOWS NO REGION OR RACE
ITS TIME FOR US TO SHARE A HUMANE SPACE
BUILD ON SOCIAL CAPITAL, PROMOTE ECONOMIC STABILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR HOMES HAVE BEEN RIPPED APART BY MORAL AND SPIRITUAL DECAY
AND THE ONUS IS ON OUR WOMENFOLK TO KEEP THINGS AT BAY
PRAY FOR OUR MOTHERS, OUR SISTERS TO COPE
THEIR ONLY AMMUNITION, FAITH AND HOPE
WE MUST BUILD A PEACEFUL SOCIETY.

WHEN MEN ABSCOND, TRUE FATHER FIGURES STILL TO BE FOUND
SINGLE PARENTING BECOMES AN ADVERSARY
THE SILENT RAGE OF A GENERATION, IS MORE THAN A TRAGEDY
MEN LET US BUILD A PEACEFUL SOCIETY.

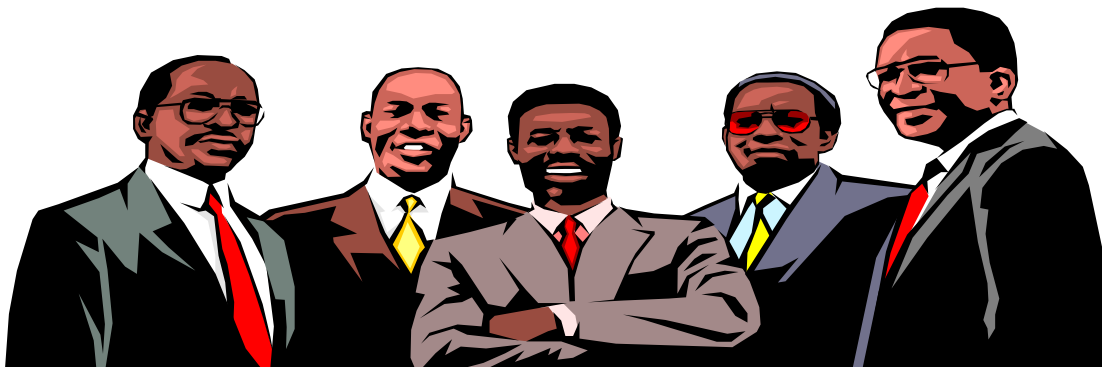
WHEN POLITICIANS PONTIFICATE AND LEGISLATE ON SOCIAL VALUES
PROVIDING ONLY SHORT TERM ECONOMIC CLUES
THE ROAD TO SOCIAL STABILITY IS LONGER THAN FINANCIAL PRUDENCY
LET US BUILD A PEACEFUL SOCIETY.

WHEN HOUSEWIVES ARE NOT ACCEPTED AS HOME MANAGERS
A PERFECT HOME WILL ALWAYS BE A MYTH
GREATER INCOME BUT NO POWER SHARING
IS NOT THE STRUCTURE FOR SOCIAL FAMILY PLANNING
AVOID THE TENSIONS, DO A FEASIBILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN WE AS A PEOPLE BECOME VOID OF RACE, CLASS, COLOUR
AND UNITE WITH ONE VIGOUR
TO ERADICATE THE SCOURGES THAT LIMIT OUR POWER
BUILDING A PEACEFUL SOCIETY
WILL NO LONGER BE A DREAM, BUT A PRACTICAL REALITY
PEACE, LET US SHARE THE PROCESS.

Composed by David Law, one of the Management Coordinators of MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW) for the celebration of International Women's Day 2002 and read by him for the first time at 2.45pm, Friday 8th March 2002 on the Brian Lara Promenade, Independence Square, Port of Spain. (This was the seventh (7th) contribution to this Day by Men Against Violence Against Women.)

M.A.V.A.W.

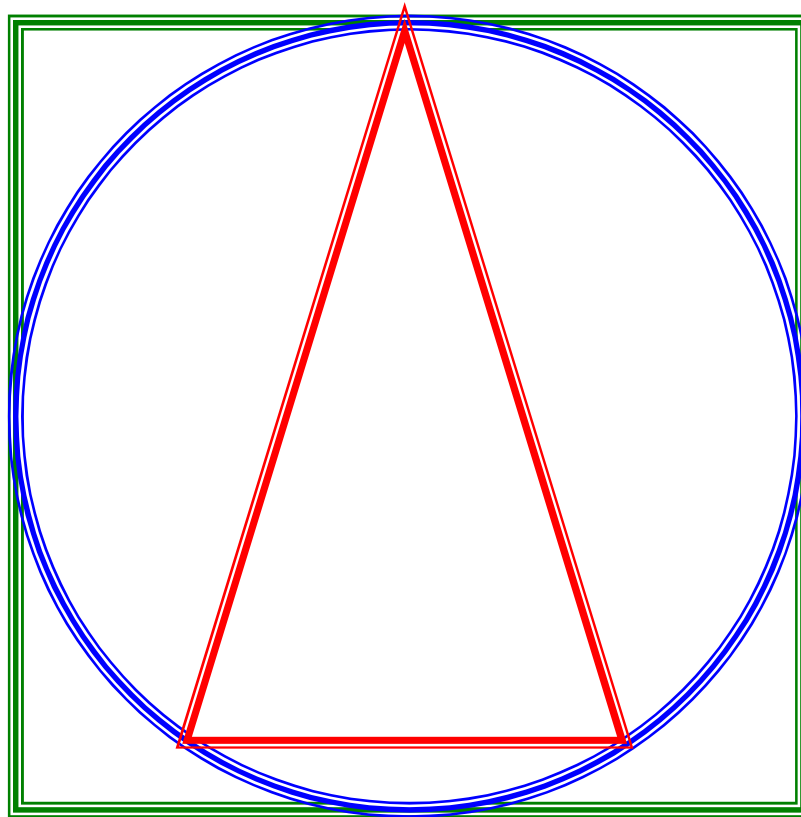


M.A.V.A.W.'s Vision



TWENTY-FIRST CENTURY

A Culture Of Peace



***YOURS IN NATION BUILDING.
MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW)***



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. 753-0804 Fax: 637-0924.

Email: mavawsec@yahoo.com. Website: <http://mavaw.com>



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Wed/12/Jul/2000

Our Ref.: DDB/E/1/00

Your Ref:

TO WHOM IT MAY CONCERN (editors, heads of news etc.)

THE VIOLENCE IN ARCHITECTURE

The most **insidious**, **crippling** and **challenging** problem facing the profession of **Architecture** today is “**Shelter and Settlement Violence**”, generally called **Domestic Violence**.

Insidious, in that the profession has failed to date, to accept, recognize, appreciate and solutionise for the prevalence of Violence that emanates from the **Familial Environment**, which always include some form of **Shelter**.

Crippling, in that regardless of the beautiful structures built and secured, dysfunctional human beings, continue to wreck havoc, in and around such space solutions.

Challenging, in that the necessary **Research** to inform Curriculum Design for **Programmes in Architecture** is not yet deemed essential, especially Research to assist in **Behaviour Change Strategies**.

In addition, no attention is being paid to the increasing demand for “**Transitional Homes**”, for both **men and women**, who have been living in **Violent Relationships**. Said Homes, obviously, have to be designed, using an informed base on the “**Psychosocial Effects of Enclosed Space on Human Behavior**”.

Until the majority of **Architects** stop believing that **Architecture** is a profession for **Architects** and is instead, a **Service To Mankind**, which shapes Space to provide maximum comfort, increase production levels and reduce frustration levels, eventually contributing to balanced human beings, we will not be given the opportunity to have as an Ally, one of the most important partners in Mankind’s Quest for full Democratic development, namely “**Gender Sensitive Architects**”.

Hats off to modern day **Architects like Colin Laird**, who in my view, realizes that the two most Critical Components of **Architecture** in the **Future** will be “**Green and Natural Growth Architecture**”

Signed DONALD BERMENT Secretary MAVAW.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators: David Law, Johnny Bharath,

P.O.R.O.

HEALTHY RELATIONSHIPS CURRICULUM.

EDITED FOR USE ON COMPUTERS IN JANUARY 2001.

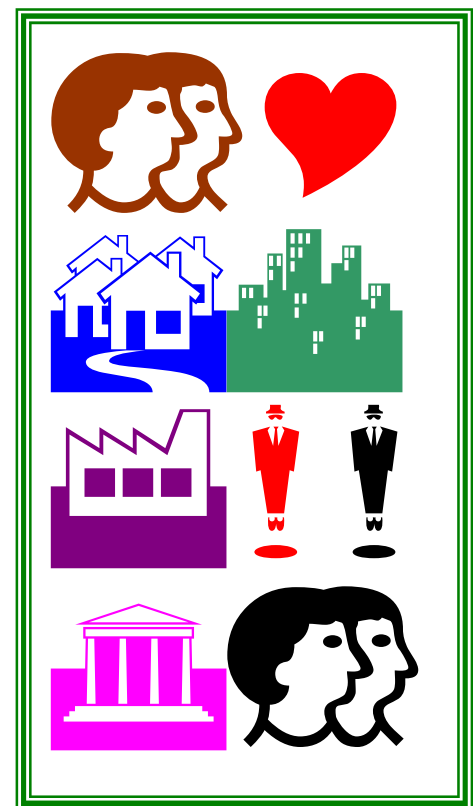
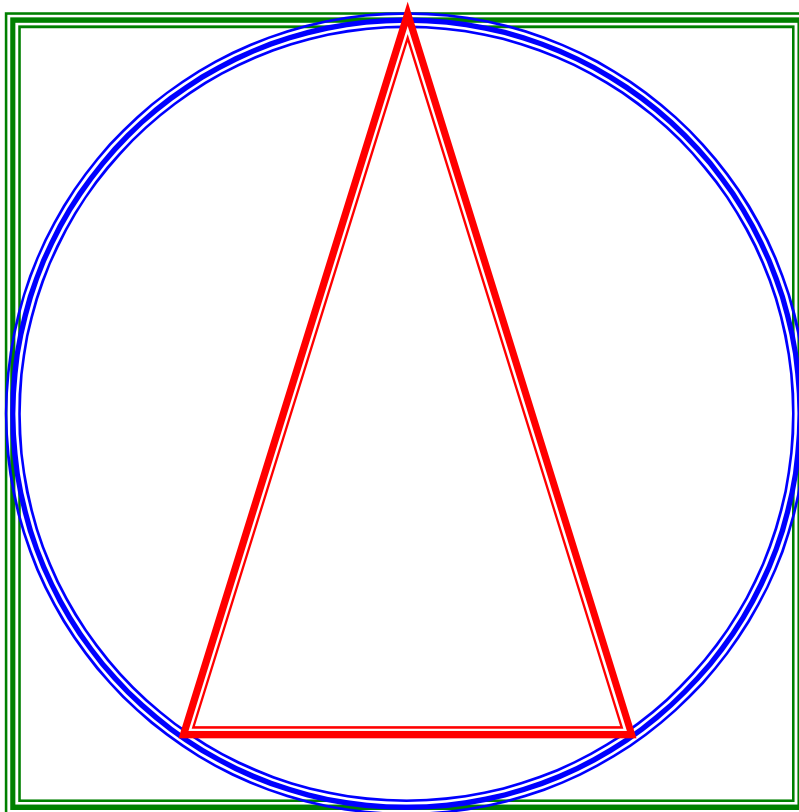
BY MEN AGAINST VIOLENCE AGAINST WOMEN.



Twenty-First Century

Projects By *M.A.V.A.W.*

A Culture Of Peace



Directors: **Christopher Holder, CHAIRMAN.** **Donald Berment, SECRETARY.** **Desmond Persad, TREASURER.**
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
Yours In Nation Building.

Republic Of Trinidad And Tobago

MAVAW's Healthy Relationships Project Jan. 2001.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.-1994.

FIRST DIRECTORS: CHAIRMAN Christopher Holder: SECRETARY Donald Berment: TREASURER Desmond Persad-1998.



Men Against Violence Against Women.

Yours In Nation Building.

REGISTERED NON-PROFIT COMPANY—NO M 1799 (95). Charitable Status F (BUD): 7/4/205



Men Against Violence Against Women



2001 - 2002

PEACE ACHIEVEMENT PROJECT

FIVE-MONTH DURATION.

***Trinidad And Tobago
Inmate Population.***

Utilizing

Healthy Relationships

A 3-Volume Violence-Prevention Curriculum

{Designed By “Men For Change”}

- ♥ 53 user-friendly activities adapted to our Caribbean lifestyle.
- ♥ Reproducible participant handouts.
- ♥ Audio-video resources with a strong local content.
- ♥ Approximately 80 hours of instructional time, (lunch period excluded)
- ♥ Teacher training for succession is recommended.



Yours In Nation Building

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G.M. Co-ordinators: David Law, Johnny Bharath.

P.O.R.O.



Men Against Violence Against Women



Contents



- ♥ **M.A.V.A.W. Covering Letter.**
- ♥ **Goals Of M.A.V.A.W.**
- ♥ **Frequently Asked Questions About the **Healthy Relationship Curriculum {HRC}**.**
- ♥ **Foreword for **HRC {Three Volumes}****
- ♥ **Introduction To Volume One. *{Dealing With Aggression}*.**
- ♥ **Table of Contents: **Volume One****
- ♥ **Introduction To Volume Two. *{Gender Equality & Media Awareness}***
- ♥ **Table of Contents: **Volume Two****
- ♥ **Introduction To Volume Three. *{Forming Healthy Relationships}***
- ♥ **Table of Contents: **Volume Three****



Appendices



- Appendix (1) - Example of a Code of Conduct {Canada}**
- Appendix (2) - Causes of Violent Behaviour {NACE}. ⁽¹⁾**
- Appendix (3) - Types of Violent Behaviour {NACE}. ⁽¹⁾**
- Appendix (4) - NACE Survey Results {2000 Report}.**
- Appendix (5) - NACE Conclusion {2000 Report}.**
- Appendix (6) - TTUTA's Commitment To The Student.**
- Appendix (7) - CGU's Reducing Aggressive Behaviour In Children And Adolescents *{Components And Techniques}***



{ NACE } National Advisory Committee On Education.
{TTUTA's} Trinidad And Tobago Unified Teachers Union Code Of Ethics.
{CGU} Central Guidance Unit – Ministry Of Education – February 2000 Manual.

Yours In Nation Building
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
P.O.R.O.



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Hot Lines: 637-0924, 668-5133. Cell: 753-0804, Fax: 637-0924.

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DIRECTORS: Christopher Holder, *CHAIRMAN*. Donald Berment, *SECRETARY*. Desmond Persad, *TREASURER*.

Date: Wednesday, 10th January 2001

Our Ref.:

Your Ref.:

Mr. Prakash Williams, Principal,
Curepe Junior Secondary school.

Attention : Ms. Marcella Ruiz, Library Assistant

Subject: Peace Achievement Project 2001 {A Violence-Reduction Curriculum}

Dear Mr. Williams,

Firstly, let me formally thank you, both for the opportunity we had to interface with some of your students in December of 2000 and also the upcoming opportunity to do an intensive, focussed programme in 2001.

Our organization **M.A.V.A.W.**, as our documents on your file will show, has a history of proactive, aggressive, gender-sensitive efforts, to deal with this pervasive problem of violence in our society, both locally and internationally.

We are fully aware of the many other organizations and citizens, who are working as hard as **M.A.V.A.W.**, to create the behavioral changes, so essential for peaceful democratic growth in our beloved twin-island state of Trinidad and Tobago.

The most recent, relevant effort, is that of the National Advisory Committee On Education {NACE}, when in April of 2000, they presented to the Minister of Education, the Honorable Kamla Persad Bissessar, the ACTION PLAN TO ADDRESS THE PROBLEM OF VIOLENCE IN OUR Schools, sections of which, have been reproduced in Appendices (2) to (5) and attached for your ease of reference.

We therefore, respectfully submit this effort, for implementation in your school environment and sincerely hope that its' success as a pilot project, will open the doors for the introduction of a NATIONAL HEALTHY RELATIONSHIP CURRICULUM in all our schools, eventually achieving peace amongst our present and future adults.

TIME-FINANCE FORECAST {2001}

TIME	FORM 1 {Hrs}	FORM 2 {Hrs}	FORM 3 {Hrs}	Grand Total	Remarks.
Morning Shift	75 Total Hrs.	75 Total Hrs.	75 Total Hrs.	225 Hours.	<u>Stipend</u> for 2 Hrs per day: \$100.00 <u>Lunch:</u> \$20.00 <u>Travel:</u> \$20.00 Computer <u>Stationery:</u> Print Ink, Laid Paper, Diskettes: \$60.00 <u>Handouts:</u> 53 Activities. Adapted for local use.
Evening Shift	75 Total Hrs.	75 Total Hrs.	75 Total Hrs.	225 Hours.	
2 Hours Per Day {1 Hr. per shift}- 3 Days Per Week - For 75 Wk.				450 Hours.	
<u>Handouts-Computer Stationery-Transportation-Lunch-Stipend- etc., 1 Day-</u> \$200.00.				<u>3 Days -</u> <u>\$600.00</u>	

Signed.....DONALD BERMENT Secretary M.A.V.A.W

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators : David Law, Johnny Bharath,

P.O.R.O.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



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Yours In Nation Building

P.O.R.O.

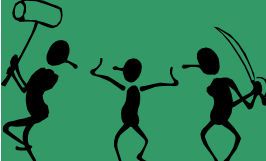
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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.
FIRST DIRECTORS—CHAIRMAN—CHRISTOPHER HOLDER—SECRETARY—DONALD BERMENT—TREASURER—DESMOND PERSAD.

Frequently Asked Questions About The Healthy Relationships Curriculum

☺Developed By Men For Change☺

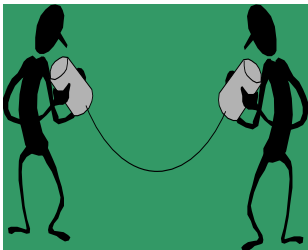
HISTORY



VOLUME ONE
Dealing With Aggression.



VOLUME TWO
Gender Equality/Media Awareness.



VOLUME THREE
Forming Healthy Relationships

Men For Change.
Box 33005, Quinpool P.O.
Halifax, Nova Scotia
Canada B3L 4T6
Tel: (902) 422-8476
Fax: (902) 425-1826
E-mail: healthy@fox.nstn.ca

1. What Is Men For Change?

Men For Change is a men's group based in Halifax, Nova Scotia, Canada, that formed in 1989, in response to the horrific, multiple murder of 14 female engineering students, in Montreal, Quebec. We continue to work in our community, towards our goals of promoting gender equality and ending violence in society. The **Healthy Relationships Curriculum**, is our principal offering to communities in support of these goals. More information about **Men For Change** is available at our Web site: http://www.chebucto.ns.ca/CommunitySupport/MenforChange/m4c_back.html.

2. How Was The Healthy Relationships Curriculum Developed ?

After facilitating workshops and speaking in more than a dozen schools, we saw that there was a need for a comprehensive violence-prevention curriculum that dealt with the roots of violence, rather than the symptoms. In 1992, three members of the group, Peter Davison, Roger Davis (both teachers) and Andrew Safer (a freelance journalist), committed themselves to the project. Two years later, the curriculum was introduced to educators who were working in our partner school board.

3. Who Were Your Development Partners?

The program was developed in partnership with the Halifax County-Bedford District School Board. Funding was provided through small grants from the Nova Scotia Department of Health, Community Health Promotion Fund and the IWK Children's Hospital Foundation.

CONTENT AND DESIGN

4. Who Is Healthy Relationships Curriculum Designed For?

HRC is a facilitator's guide for educators and others who work with youth in a variety of settings. The student-centered activities are designed to assist youth in the development of Emotional Intelligence, Resiliency, Problem Solving, Assertiveness, Critical Thinking and other Skills and Attitudes necessary to form and maintain **Healthy Relationships**

Page One Of Three.

IMPLEMENTATION.

5. What Are The Key Components Of The Program And How Is It Used?

The program consists of 53 user-friendly activities, dozens of reproducible student handouts and a comprehensive print and video resource appendix. Each activity is packaged to be delivered within a 45-minute to 1-hour time slot. The full program can take up to 75 hours of instructional time if the numerous extensions to the core activities are used. While the activities are designed to build thematically, educators can easily develop mini-modules to suit their time constraints and the specific needs of their students. The program is flexible enough to be integrated into ongoing multi-year curricula or it can be taught as a stand-alone curriculum. In the case of the latter, the three volumes are typically taught in sequential grades although selected activities are sometimes taught out of sequence to meet specific needs. Alternatively, the entire program can be taught intensively in one year if sufficient class time is available.

6. How Is The Program Organized ?

The activities in Volume One, ***“Dealing With Aggression”***, help students to recognize the range of emotions that can lead to violent outbursts and they teach the basic communication skills needed to choose healthy alternatives to solve their problems.

The activities in Volume Two, ***“Gender Equality And Media Awareness”***, examine the impact of gender stereotypes and the violent influences implicit in North American culture. Students use critical-thinking skills to analyze the power and control messages in popular culture—from TV to music—that can lead to violence in relationships.

The activities in Volume Three, ***“Building Healthy Relationships”***, demonstrate the link between sexist attitudes and violent behaviours and the key role this link plays in **teen dating violence** and **domestic violence**. Students are also shown that **Respect, Safety, Equality, Trust, Empathy**, and a **Sense Of Personal Responsibility** are the **Attitudes** and **Values** on which **Healthy Relationships** are built.

7. Who Is Using HRC?

The program is currently being used in a wide variety of applications in youth education. They include: Juvenile Offender Institutions and Program Health Centers, Public Schools (in Health, Family Studies, Counseling, Career and Life Management, and French Immersion Courses) Outreach Programs in Battered Women's Centers, Sexual Assault Crisis Centers, Community Youth Centers, Child Welfare Agencies, University-level Teacher Education Classes and Parenting Education Classes.

8. What Support Is Offered When I Buy The Program?

As the developers and publishers of HRC, we pride ourselves in offering personal service with every sale. We are eager to consult with you regarding implementation issues and we are also happy to refer you to other professionals who are using the program, either in your own discipline or in your geographical area. We welcome your inquiries and offer support to you by phone, fax or e-mail. You can also keep up-to-date on new curriculum and implementation developments through our newsletter and announcements on our Web site at: <http://fox.nstn.ca/~healthy>. We are also pleased to offer staff training.

9. How Much Training Do I Need To Use HRC ?

The program is designed to be teacher friendly and many users report that they appreciate the *“pick up and go”* aspect of the program. Anyone who has teaching experience, or who is experienced in working with youth will find this program easy to use. If your Organisation or school wishes to include staff training as part of an after-sale service provision, we would be delighted to work with you to design a staff training session to meet your educators' specific needs and challenges.

10. What Professional Training Experience Do The Developers Have?

Since the second edition of HRC was published in 1994, we have hosted training sessions from coast to coast in North America. We have presented at conferences, to school representatives, and to teachers in Los Angeles, Phoenix, Miami and Austin in the US, and in Vancouver, Kelowna, Winnipeg, Toronto, St. John's, and Corner Brook and throughout Nova Scotia in Canada.

The three members of the development team have over 35 years of collective experience in the field of education and violence prevention and we continue to work in this field today.

11. What Distinguishes HRC From Other Violence-Prevention Programs ?

Research indicates that people, who are violent to others, lack one or more of the following skills: - Problem Solving, Anger Management, Empathy, and Impulse Control. Like most programs offered in schools for violence-prevention, HRC teaches students the prosocial skills necessary to create lasting relationships. But this curriculum takes student learning to a deeper level by using Gender Analysis as a powerful tool for exposing the roots of violent and aggressive behaviours. ***By empowering students to analyze the culture of violence that condones abusive behaviour, we are taking the first necessary step towards helping them to create the violence-free society of tomorrow.*** This holistic approach towards learning, coupled with a methodology that encompasses the teaching of knowledge, skills and attitudes, are the elements that are most valued in this program.

12. Where does HRC Fit Into The Philosophy of Progressive Violence-Prevention Education?

HRC can be used as a stand-alone resource or it can be easily integrated with existing curricula. There are three levels of prevention;

- (1) **PRIMARY PREVENTION**, which is also known as Proactive Prevention because it is geared towards stopping violence before it starts;
- (2) **SECONDARY PREVENTION**, which is known as Intervention or Protection because it seeks to prevent violence from continuing; and
- (3) **TERTIARY PREVENTION**, or Support and Treatment that promotes healing from the after effects of violence to ensure it will not recur.

The widest application of HRC with young people is Primary Prevention. The object is to build the necessary skills, confidence and attitudes that will prevent youth from getting into an unhealthy or violent situation in the first place. The program also provides an effective tool for Secondary Prevention because it alerts young people who are currently in abusive situations as to both the dangers and the routes to leave. Disclosures are not uncommon when the program is delivered to this audience.

HRC can also be used in the context of providing support counseling and treatment for both victims and perpetrators of violence, in order to help them learn prosocial skills and gain positive attitudes that are needed to foster **Healthy Relationships**.

13. How Is HRC Being Received Across America?

Since we began our marketing efforts in 1994 we have sold HRC throughout North America including all provinces and territories in Canada and 26 US States. In the process of gathering material for our newsletters we have followed up on dozens of implementations and discovered that the curriculum has found its way into applications that we never imagined when we were developing it. It seems to have taken on a life of its own.

14. What Research Or Evaluation Has Been Conducted?

In 1996, the Manitoba Research Centre On Family Violence And Violence Against Women, chose HRC to be the subject of a three-year longitudinal study. Post-test data is currently being compiled. HRC was selected from 12 violence-prevention programs published in North America because, according to Researcher Dr. Wendy Josephson, it is "an integrated long-term approach, well planned curriculum and is attractive to teachers." In 1995 the Centre For Research On Violence Against Women And Children In London, Ontario, reviewed HRC and listed it as the only violence-prevention resource recommended for secondary schools. In 1995 the Nova Scotia Department Of Education also formally reviewed the program and placed it on its List Of Authorized Learning Materials.

15. What Other Languages HRC Is Available In?

The Nova Scotia Department Of Education is currently translating HRC into French. The French version will be available in January of 1998.

TESTIMONIALS.

{Testimonials Can Be Provided On Request}
You can reach the Developers and Publishers of HRC
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FOREWORD FOR H.R.C.-----Volume One, Two and Three.

OUR society is at war with itself. For many, violence has become the path of least resistance when it comes to solving problems, as school teachers and administrators well know. Recently, a fourteen-year-old Halifax boy was suspended from school for carrying around a sawed-off shotgun, and a ten-year old Dartmouth girl came home with scratches on her face, chest and arms—compliments of the school bully.

THIS curriculum is an attempt to address the underlying issues that contribute to violent behaviour. Once students begin to explore these issues, they will be better equipped to free themselves from the deeper ingrained attitudes and beliefs that foster and justify anti-social actions.

MEN are traditionally portrayed as strong, silent, and powerful, while women are stereo-typically understood to be passive, sexually available care givers. For many years, our popular culture has been delivering a dangerous message: *that it is okay for men to dominate and control “the weaker sex”*. This has fuelled not only male violence against women, but also male violence against other men who are perceived to be weaker—the “wimps”, the “sissies”, and the other “queers”.

ALTHOUGH the women’s movement for liberation began exposing this imbalance of power and injustice many years ago, it is only recently that men have begun to work towards a new social ethic of gender equality that is based on respecting women for who they are, as opposed to “keeping them in their place”.

THIS curriculum frequently makes reference to “male violence”. This is not meant to ignore or condone violence that is perpetrated by women. However, the majority of violent acts, such as assault, rape and murder are done by men. We

believe that women who trample on the rights of others are also modelling themselves on the tough male stereotype. Therefore, the model itself is what warrants close scrutiny. The object is to help students of both genders learn the skills that build healthy relationships, which are based on sharing power with others as opposed to exerting power over others.

HALIFAX--based Men For Change formed in 1989 in the aftermath of the tragic killing of 14 female engineering students at Ecole’ Polytechnique in Montreal. The group has been meeting regularly since then with the hope of understanding better the confusion and violence that all too often characterizes male-female relationships. Men For Change has also become involved in social action in a variety of ways, via hosting a film series, speaking in schools and churches, and writing letters to the editors of newspapers in the province.

MOST of the educational efforts dealing with abuse have emphasized helping people to become aware of their rights and choices, identifying abusive situations and the various forms of abuse, and knowing what to do if you or someone you know is being abused. This is necessary information for both boys and girls.

THE following lessons are intended to complement the sexual safety curriculum, by presenting cultural values that influence violent behaviour and by exploring the psycho-social dynamics of male violence altogether. But the intent here is not to paint a bleak picture. The purpose is to help students face facts about this pervasive problem, and also to present them with models of healthy relationships. Helping students to analyze the culture of violence that condones abusive behaviour, is the first step

{Page One Of Two}

FOREWORD FOR H.R.C.-----Volume One, Two and Three.

towards empowering them to create the violence-free culture of tomorrow.

MEN FOR CHANGE believes that the best place to tackle the problem of violence is in the public schools, where a teacher's words and actions can help to shape life-long attitudes. For the same reason, school is the ideal place to begin transforming gender relations—away from entrenched disparities and towards an equitable and safe social environment.

MEMBERS of Men For Change have been pleased to lead discussions and provide workshops in more than a dozen junior high schools in metro and outlying school districts. This curriculum was inspired by our in-school meetings with Grade 7, 8, and 9 students. It is meant to be a road map, not an exhaustive treatise. What differentiates this classroom programme from most violence-prevention initiatives is that it was developed and written by MEN. As such, a strong theme of men's accountability runs throughout the lessons.

IN addressing issues of violence, we believe that it is critical not only to look at how women, children and stigmatized men suffer as victims, but also to see how men suffer from the gender gridlock of stereotypical male roles. Vulnerability is feared by many men who believe that it is a weakness to be emotional; this prevents them from forming whole relationships. Often this spawns the contorted processes that lead to violence—from sexist jokes to murder. We hope this material enables students to see the linkages between sexist attitudes and violence, and we hope it encourages them to develop critical-thinking skills about these important issues. If the presentation of these lessons is successful, attitudinal and lifestyle changes will likely follow.

THIS curriculum will be of little use if it is only pulled off the shelf once or twice a year to be used as “filler” for the Health program. It will be of value if students, teachers, administrators and the community at large decide to make violence-prevention a high priority issue in the schools. We see this initiative as a partnership for change.

GRADE 7 is focussed on helping students learn how to deal with aggression. When children reach puberty, they begin to experience emotions more intensely. The lessons are designed to help them recognize the range of emotions that can lead to violent outbursts, and to show them that there are non-aggressive alternatives.

HAVING explored the various nuances of aggression; **In Grade 8**, students are introduced to violent influences in the mass media—from TV to comics. The intention is to give them tools that will empower them to stand back and take a critical look at the messages they are being fed, as opposed to absorbing them unawares.

BY the time students reach Grade 9, relationships become increasingly important. The lessons progress from an investigation of male violence against women, to an exploration of healthy relationships. Students learn a variety of communication skills within a context of small groups. This format enables them to experience the dynamics of relationships, and to begin to work together more closely on issues of violence and gender equality.



{Page Two Of Two}

Introduction To Volume One-----Dealing With Aggression

GOALS

Healthy Relationships is a VIOLENCE-PREVENTION CURRICULUM that is designed to help teen-age youth understand the dynamics of both **Unhealthy** and **Healthy Relationships**. Volume One introduces students to Self-awareness and Communication Skills and is intended to accomplish the following goals: -

- ℵ Increase the students EMOTIONAL LITERACY.
- ℵ Help students to recognize and effectively deal with ANGER.
- ℵ Explore Choices when dealing with CONFLICT Situations.
- ℵ Learn Communication Skills.

CURRICULUM DESIGN

The activities are best integrated into the Personal Development and **Relationships** (PDR) component of the Health Curriculum. However, **Healthy Relationships** is also suitable for use in Family Studies and English classes, as well as other Classes that Focus on GENDER RELATIONS and **VIOLENCE**.

Although the CURRICULUM was designed for Classroom use, it can easily be adapted to accommodate ONE-ON-ONE or Small Group Presentations in a variety of Community-Based settings.

ORGANISATION OF THE ACTIVITIES

PREPARATION : Notes to the facilitator offered at the beginning of each activity appear in this type style.

TIME ALLOTMENT : Unless otherwise indicated, activities are designed to fill the average 40-Minute Class Period. ROLE PLAYS and Extension Activities may require more time, depending on the enthusiasm of the Class.

The main text of each activity is written in the style of a suggested script, which can be read to the students. Feel free to improvise your own words when presenting this material.

Questions that appear in the script are indicated by “ Q. “ the questions have been formulated in such a way so as to encourage student responses (i.e. *minimize “yes” and “no” answers*).

Possible responses are often given in italics. Italics are also used to provide the facilitator with additional information.

ℵ **Actions** to be taken are highlighted by a DOT and an indentation.

Role Plays may be used as discussion topics or as simulation for dramatizations.

Healthy Relationships Curriculum--Designed By Men For Change.

VOLUME ONE---*Healthy Relationships Curriculum.*

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Designed By “MEN FOR CHANGE”---Halifax, Canada.

Introduction To Volume Two---Gender Equality & Media Awareness

GOALS

In Volume Two of **Healthy Relationships**, students will understand the CAUSES and CONDITIONS that result in **VIOLENT ACTIONS**, and they will learn that there are Always Constructive Alternatives.

Many of the Lessons in Volume Two are designed to show students the Linkages between Gender Role Stereotypes and **VIOLENT BEHAVIOUR**. Examples from the Popular Media (magazines, newspapers, TV, films, comics, and songs) are used to develop the **GENDER ANALYSIS**. The other Predominant Theme in this Grade Level is to expose the **Culture Of Violence** in which we live. To this end, Television Violence is studied in some detail.

Volume Two Goals are: -

- ℵ To increase student's awareness of the Media's Influences.
- ℵ To help students understand the impact of Television on their lives.
- ℵ To show students how SEXISM leads to **VIOLENCE**.
- ℵ To help students recognize the Pervasiveness of Gender Stereotypes.
- ℵ To help students understand the potentially Damaging Influences of Violent Role Models.
- ℵ To encourage students to celebrate their own Talents and Gifts.

CURRICULUM DESIGN

SIMILAR--TO--VOLUME--ONE--INTRODUCTION

ORGANIZATION OF THE ACTIVITIES

(SIMILAR--TO -- VOLUME --ONE-- INTRODUCTION)

Newspaper Articles have been incorporated into some of the activities in order to provide perspective and an in-depth analysis of the ISSUE being studied. In many cases, students bringing in Articles of their own could further enrich sessions. Aside from increasing student involvement, a further advantage of the use of Newspapers, is the potential for Parent Participation. Some students will likely ask their Parents to help them find an article that addresses a particular topic. This could prove to be an excellent way to invite Parents into the **VIOLENCE-PREVENTION ARENA**.

Healthy Relationships Curriculum--Designed By Men For Change.

VOLUME TWO---*Healthy Relationships Curriculum.*

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Designed By “MEN FOR CHANGE”---Halifax, Canada.

Introduction To Volume Three--- *Forming Healthy Relationships*

BACKGROUND

Volume Three Program focuses on **Building Healthy Relationships**. The *INSTRUCTIONAL MODEL* suggested for this is, **Extended Group Work**. There are many reasons for this advice: -

1. Students can work together to practice the Communication Skills, which are needed for. **Healthy Relationships**.
2. They can decide as a **Group** which sorts of Activities they wish to do.
3. There is an Opportunity to do some "TEAM BUILDING" and to develop a sense of Belonging.

Because PEER LEARNING is one of the most powerful ways TEENS Learn, they will have Opportunities to learn from each other, about the EXPERIENCE of being *MALE* or *FEMALE*, vis-à-vis, Cultural Gender Roles.

Each Group could consist of FOUR PEOPLE – ideally, Two Boys and Two Girls, but this may not always be possible. We are calling the Groups "**GENDER JUSTICE ACTION GROUPS**". This Title makes it very clear what our Intention is. We are working toward EQUALITY between the Genders, in all areas of LIFE, and we are working toward JUSTICE---that is, ending all Forms of **Gender-Related Violence** and **Oppression**.

The **First TWO SESSIONS** will explore how **Unrealistic Expectations and SEXIST Attitudes position Male-Female Relationships**.

The **Next TWO SESSIONS** will teach students Constructive Communication Skills.

The **FINAL SESSION** will encourage students to Work Towards Achieving Gender Justice, both in their **Own Relationships** and Within the School Community.

GOALS

Healthy Relationships is a **VIOLENCE -PREVENTION CURRICULUM**. As such, it is designed to introduce Junior-High School students to the CHARACTERISTICS of **Relationships** that are based on **TRUST** rather than **FEAR**. Junior-High is a very precarious time in a Person's Life, because of Physical, Sexual, Social, and Intellectual Changes that are Both SUDDEN and RAPID.

THE Intent is to provide students with a MAP that will stand them in good stead as their Relationships Mature.

The Activities are Student Centered, so that students will be able to EXPERIENCE what they are Learning, as Opposed to Passively Being TAUGHT.

The Activities emphasize that **Healthy Relationships** are based on Fundamental **RESPECT**, and Open **Communication**, and that **Relationships** GO WRONG when **Either** of these ELEMENTS is Eclipsed.

THIS CURRICULUM WILL HAVE SUCCEEDED IF IT HELPS STUDENTS TO BETTER PREPARE FOR THE MULTIPLICITY OF RELATIONSHIPS THAT AWAIT THEM.

{Curriculum Design And Organisation Of The Activities Similar To Volume Two}

Healthy Relationships Curriculum----Designed By Men For Change.

VOLUME THREE---*Healthy Relationships Curriculum.*

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Designed By “MEN FOR CHANGE”----Halifax, Canada.



Men Against Violence Against Women



APPENDIX {1}

Code Of Student Behaviour – Canadian Model.

Pope John Paul 11 Catholic School – 685 Military Trail - Scarborough, ONTARIO, M1E 4P6

Pope John Paul 11 aims to provide for its students and staff a school environment, which is welcoming, safe and reflects the gospel values. To achieve this, all members of the school community are expected to: -

- ♥ Show respect for self, others and school property.
- ♥ Learn to work as individuals as well as with others.
- ♥ Value and be committed to the development of a school culture, which fosters co-operation.
- ♥ Read, understand and abide by the Code Of Behaviour and all other School Regulations outlined below.

General Expectations of Student Behaviour.

- ♥ Attend all scheduled classes regularly and punctually.
- ♥ Be courteous and co-operative at all times.
- ♥ Exercise self-discipline.
- ♥ Be in full uniform during the entire school day.
- ♥ Come to class prepared to work at learning.

Behaviour Outside the Classroom.

- ♥ Students are not to be wandering the halls during lunch and are not to disturb classes that are in progress.
- ♥ Students are to co-operative with ALL STAFF, in a courteous and respectful manner at all times **and must identify themselves when asked to do so.**
- ♥ Students who have a study period during periods one and two are to work in the Cafeteria or in the Library. During period four, the Cafeteria is not available. Students are not allowed to be in the halls or the Pit areas during their study period.
- ♥ Food can only be eaten inside the Cafeteria or in the Green Pit during the lunch period.

- ♥ Students are to be in full uniform during their lunch and their study period.

- ♥ All students are asked to leave the school at the end of the day unless they are involved in a supervised activity.

Language

- ♥ All members of the school community will be expected to refrain from demeaning, degrading, stereotypical or confrontational forms of language when dealing with each other.

Drugs and Alcohol

If a student is found in the school **{at any school-sponsored activity, day or night}**, under the influence of alcohol or a non-prescription type drug, the student will be subject to sanctions which include the following: -

- ♥ Communication with parents and/or the Police.
- ♥ Suspension.

COUNSELLING SERVICES ARE AVAILABLE THROUGH STUDENT SERVICES

If a student is found selling any of the above-mentioned substances, he/she: -

- ♥ Will be suspended.
- ♥ May be asked to transfer out of Pope John Paul 11 community.
- ♥ Will be required to speak to the Police.

PAGE ONE OF TWO



Smoking

The Toronto Catholic District School Board is declared a smoke-free environment. Smoking is not permitted inside or outside any school or Board property. If a student is found smoking on school property or on any school related-sponsored activity, the following sanctions will apply: -

- ♥ A letter will be sent home to the parents.
- ♥ A suspension will be administered for subsequent incidents.
- ♥ *Toronto Board of Health will be notified and a summons or ticket may be issued.*

Counseling and Smoking Cessation Programmes can be accessed through our Student Services Department and/or outside Agencies.

Beepers, Cellular Phones, Radios, CD Players

Students are expected to value their time in class and are not to bring beepers, cellular phones, Walkman tape players, CD players and radios to class. These devices interfere with the ability to focus on academic success. Students found in possession of these items can expect to have them confiscated.

Violence Prevention

The staff, students and parents of Pope John Paul 11 Catholic Secondary School strive to create a school community where a sense for belonging and caring for one another prevails. It is everyone's responsibility to ensure a safe and secure school environment. Our Policy for VIOLENCE PREVENTION is based on the Toronto Catholic District School Board's *Mission Statement of creating a safe and welcoming learning environment for all members of the community.* **Violence will not be tolerated at Pope John Paul 11 or in any TCDSB schools.** The Board Policy states: -

- ♥ Intimidation {Physical, Verbal or Written}, Physical, Sexual or Psychological Abuse and/or any form of Bullying, will not be tolerated.
- ♥ Discrimination, Harassment or Bullying on the basis of Race, Culture, Gender, Language, Disability, Sexual Orientation, or any other attribute is UNACCEPTABLE as is Deliberate Degradation of any individual for any reason whatsoever.
- ♥ Deliberate vandalism of school property or damage to personal property in the school environment is unacceptable.



Consequences For Failure to Abide by Code

When a student experiences difficulty following the school's Policies and Procedures, as outlined in this Agenda, a number of different consequences may be applied. These include **CONTACTING PARENTS, INTERVIEWS WITH THE VICE PRINCIPAL, SERVING EARLY MORNING SIGN-INS, DETENTIONS, COMMUNITY WORK, OR SUSPENSION.** The Consequences for Incidents Involving VIOLENCE Include ***Suspension, the Filing of a Violent Incident Report, Expulsion and possible Transfer to another School where applicable.***

Early Morning Sign-ins. Students who are frequently late will be asked to sign-in at the Main Office between 8.00 and 8.10 a.m.

Detentions: Detentions take precedence over all extra-curricular. They are commonly assigned for Uniform Violations and as a consequence to Skipping. They begin five minutes after the end of the school day and their length may vary up to one hour. Students are to report to room 154 in full uniform and be prepared to work on their studies in Silence. Should a student neglect to serve a Detention, then Two Detentions will be assigned. Failure to serve either of these two detentions may result in a Suspension or some form of Community work.

Violent Incident Reports: These Forms are completed for Incidents such as, but not limited to: -

- ♥ Possession of a Weapon {guns, knives etc.}
- ♥ Threats of Serious Physical Injury.
- ♥ Physical Assault Causing Serious Bodily Harm.
- ♥ Sexual Assault.
- ♥ Any Hate Motivated Violence.
- ♥ Robbery and Extortion.
- ♥ Vandalism Causing Extensive Damage to School Property or Property Located on School Premises.

A Violent Incident Report recording Violent Behaviour which results in a Suspension and/or Report to the Police shall be retained in the student's OSR for **three years.**

A Violent Incident Report recording Violent Behaviour, which results in a Recommendation for Expulsion, shall be retained in the OSR for **five years.**

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Men Against Violence Against Women



APPENDIX {2}

Causes Of Violent Behaviour - 2000 Report

{National Advisory Committee On Education {N.A.C.E.}

There has been a general PERCEPTION, that many of our Nation's Schools, are increasingly becoming UNSAFE places. It has been vociferously stated by School Personnel and the Media, that **VIOLENCE** and **AGGRESSIVE** Behaviour, appear to be getting Out of Control.

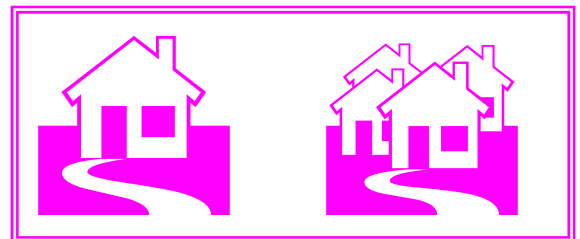
In 1989, there was a Comprehensive Report, emanating from a NATIONAL CONSULTATION ON VIOLENCE AND INDISCIPLINE IN SCHOOLS.

In spite of Periodic Reviews, there has been a LACK of Effective Implementation of the RECOMMENDATIONS arising out of that Report.

Apart from difficulties within the Schools, during recent years, there have been times, when Enraged Parents and Criminal Elements, have INVADDED the Sanctity of the School, creating HYSTERIA and Disturbance, among the School Population.

Many views have been expressed, by EDUCATORS AND SOCIAL PSYCHOLOGISTS, about the CAUSES of this **INDISCIPLINE** and **VIOLENCE**. It has been suggested that ACTS OF VIOLENCE are: -

- 1)** Considered to be Learnt Behaviour.
- 2)** Reflected in a Value System which Condone Physical **Aggression**.
- 3)** Facilitated by Certain School Conditions.



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APPENDIX {3}

Types Of Violent Behaviour - 2000 Report *{ National Advisory Committee On Education – N.A.C.E. }*

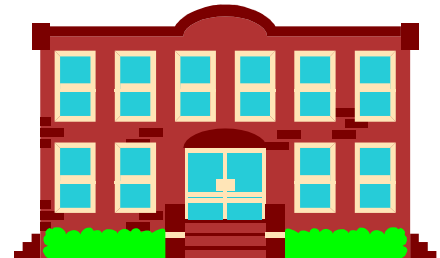
Whatever the causes, a review of the Reported Incidents of **VIOLENCE** and **AGGRESSION**, by the Ministry of Education, reveals that acts of **VIOLENCE** may be Classified as: -

- ♥ Spontaneous
- ♥ Contemplated
- ♥ Situational.



The most commonly reported acts of **VIOLENCE IN SCHOOLS** are inclusive of: -

- 1)** Fights amongst Male Students.
- 2)** Fights amongst Female Students.
- 3)** Extortion-related attacks.
- 4)** Stabbing and other Injuries by Weapons.
- 5)** Gang attacks.
- 6)** Teacher assaults on Students.
- 7)** Student assaults on Teachers.
- 8)** Verbal abuse of Teachers.
- 9)** Verbal abuse of Students.



There is nothing particularly new about acts of **VIOLENCE** in the School. The point must be made however, that SOCIETY itself has become increasingly **Violent** and WE need to DEVELOP, in a Comprehensive and Systematic way, a PLAN, for dealing Effectively with **VIOLENCE** and **AGGRESSION**, as an Urgent Priority. Our Schools MUST BECOME SAFE PLACES ONCE MORE, where Learning is Predominant.



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Men Against Violence Against Women



APPENDIX {4}

NACE Student Survey Results - 2000 Report **{Action Plan To Address The Problem Of Violence In Schools}**

Fifth and Sixth Form Students, of ten (10) Secondary Schools, were invited to give their ideas on the CAUSES of **VIOLENCE** and **INDISCIPLINE** in Schools, as well as to make Recommendations addressing the problem.

Ten (10) Students each, from both the Fifth and Sixth Forms participated and the Method used was the Interview/Questionnaire, a total of 200 forms being collected.

The STATEMENTS of the Students were groped into four (4) Categories viz.: -

- ♥ The Home
- ♥ The Society/Community
- ♥ The Individual
- ♥ The School.

When these Statements were analyzed, it was found that in most of the CAUSES of **VIOLENCE** and **INDISCIPLINE**: -

♥ 40 % were attributed to the individual, that is factors originating from within (*see Table below*). However, in reviewing the Recommendations, the majority preference for the place where corrective measures should be instituted was: -

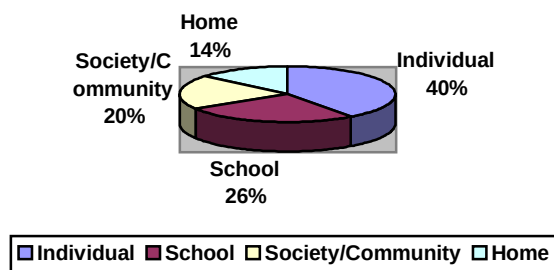
♥ 55 % noted that CHANGES should take place at the School (*see Table below*). —



STATEMENT ANALYSIS OF RESPONSES **{2000 REPORT}**

Category {Four Areas}	Causes %	Rec'ns %
Individual	40 %	2 %
School	26 %	55 %
Society/Comm'u'ty	20 %	31 %
Home	14 %	12 %
TOTAL PERCENTAGES	100 %	100 %

Causes of Violence/Indiscipline



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Men Against Violence Against Women



APPENDIX {5}

NACE Conclusion – 2000 Report

{Action Plan To Address The Problem Of Violence In Schools}

Many factors contribute to the **VIOLENCE** and **INDISCIPLINE**, being experienced in our Nation's Schools. Therefore, it will require a variety of methods, to secure a solution to the problems. While focus has to be placed on those Schools that are more troubled, in terms of the increased Pastoral work needed to be done, greater efforts must be placed, in raising the SELF-ESTEEM of the Students, who make up the largest population in our Schools.

This will be achieved, only through the concerted effort of all the STAKEHOLDERS in education. It must involve the following: -

- ♥ **The Students** learning new ways of managing ANGER and CONFLICT and SOLVING PROBLEMS.
- ♥ **The Teachers** adopting a more LOVING and COMMITTED ATTITUDE towards their students.
- ♥ **The Community** with its renewed interest in the life of the Schools, taking every opportunity to participate in the HOLISTIC development of it.
- ♥ **The Ministry of Education** with a clear agenda, focused on developing a CULTURE OF PEACE; 😊 a greater emphasis on PEDAGOGY, rather than CONTENT, in the Teachers Training Colleges; 😊 appropriate and adequate Compensation for Teachers; 😊 greater attention to STAFF DEVELOPMENT and the re-organizing of the CURRICULUM, to make it more relevant to the NEEDS of the students. 😊
- ♥ **The Wider Public**, including the PARENTS, who may need guidance in dealing with difficult situations; 😊 members of the ELECTRONIC MEDIA, who may be able to influence the BEHAVIOUR of young people, through the MUSIC they play. 😊

In most instances, a combination of these methods may have to be employed, but it is envisaged, that they will go a long way in curbing **VIOLENCE** and **INDISCIPLINE** in our Schools, the two factors, which hinder the GROWTH of our children and cast a PALL over the FUTURE of the Nation.

Finally, we wish to emphasize, that TALKING and WRITING will not be good enough. If **VIOLENCE** is to be eliminated from our Schools, then the IMPLEMENTATION of our RECOMMENDATIONS is absolutely vital.



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Men Against Violence Against Women



APPENDIX {6}

T. &T.U.T.A's. Commitment To The Student.

CODE OF ETHICS 1988

- 1)** A teacher shall always strive, to enhance the intellectual, social and moral growth of students.
- 2)** A teacher shall evoke in students, an appreciation of their self-worth.
- 3)** A teacher shall strive to instil in students, a sense of patriotism and national pride.
- 4)** A teacher shall develop in students, an appreciation of high standards and a desire to strive for excellence.
- 5)** A teacher shall not divulge, except through professional channels, any information of a personal or domestic nature, concerning students.
- 6)** A teacher shall not attempt to undermine the confidence of teachers in students, or of students in other students.
- 7)** A teacher shall take all reasonable care, to protect the safety and welfare of students.
- 8)** A teacher shall not exploit or violate, the privileged relationship, between teacher and student.
- 9)** A teacher shall not subject students to mental or physical abuse.
- 10)** A teacher shall deal justly and considerately, with each student, regardless of sex, ethnic origin, social or economic status, political or religious affiliation.
- 11)** A teacher shall respect the religious, political and moral beliefs of students.
- 12)** A teacher shall maintain, high standards of student's professional competence, by providing appropriate learning experiences for.



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APPENDIX {7}

Components Of an Effective Programme.

REDUCING AGGRESSIVE BEHAVIOUR IN CHILDREN AND ADOLESCENTS - CGU 2000

An effective Programme to Reduce **AGGRESSIVE** and **VIOLENT** Behaviour must be multi-dimensional and include the following Core Components: -

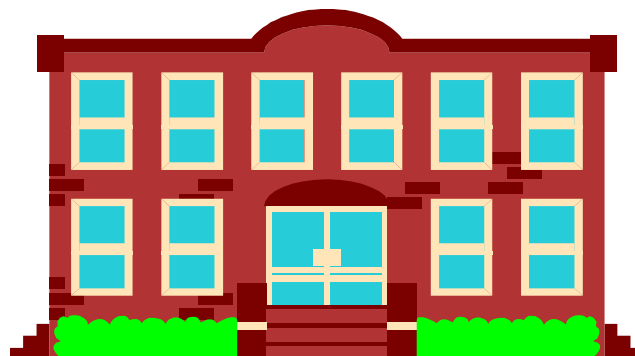
- 1) Self Esteem Enhancement.**
- 2) Awareness Of Negative Consequences Of **VIOLENCE**.**
- 3) Anger Management.**
- 4) Social – Cognitive Skills That Promote Pro-Social Behaviours.**
- 5) Problem – Solving Skills.**

This Programme must be Developmental, well co-ordinated and an Integral part of the CURRICULUM, rather than the Traditional Ad-hoc method of implementation.

Techniques For Implementation Of A Programme.

- 1) Role Playing**
- 2) Class Discussion**
- 3) Guest Speakers**
- 4) Field Visits**
- 5) Journal Keeping**

CGU (Central Guidance Unit) Ministry
Of Education – February 2000 Manual.



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☺Notes And Schedules☺

[illegible]

Yours In Nation Building
Donald Berment, Secretary MAVAW,

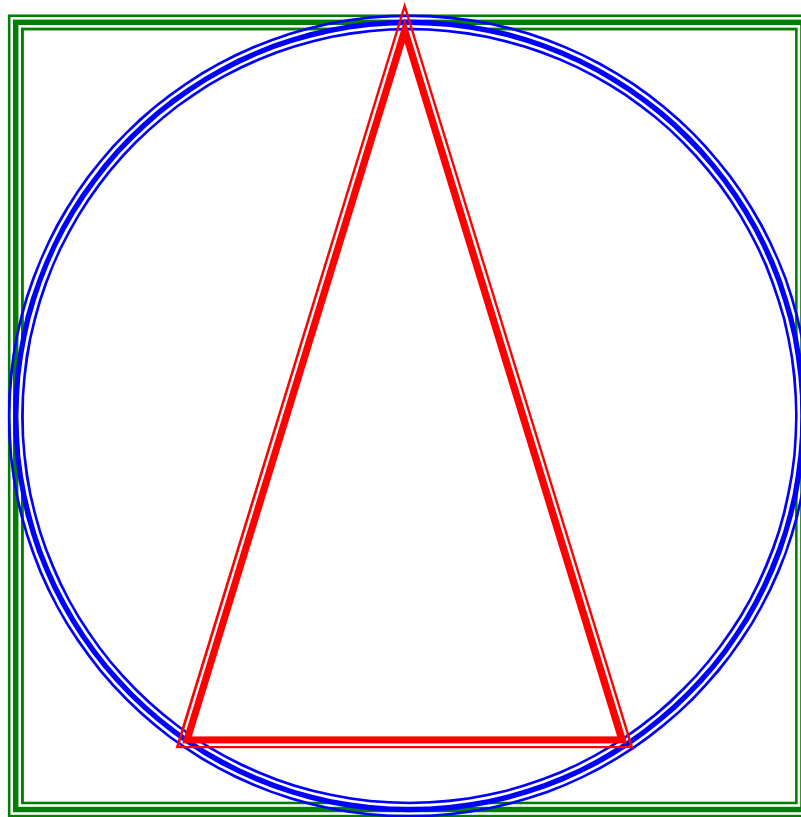


M.A.V.A.W.'s Vision



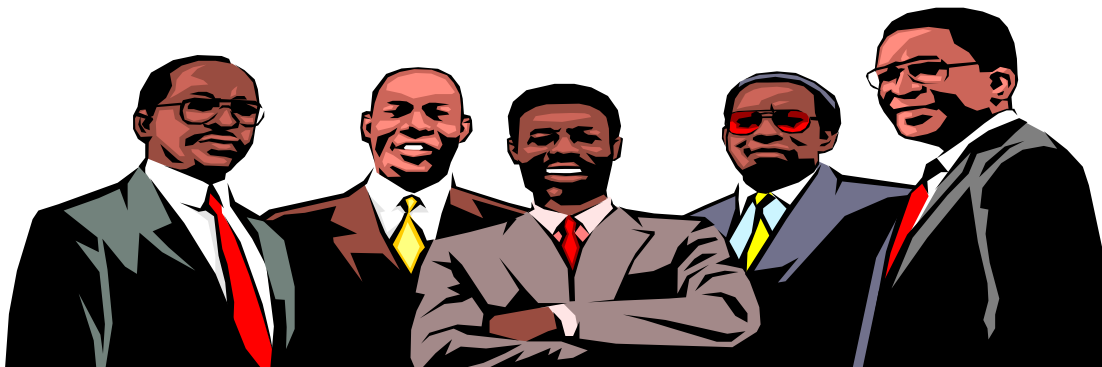
TWENTY-FIRST CENTURY

A Culture Of Peace



YOURS IN NATION BUILDING.

M.A.V.A.W.





Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. Fax: 637-0924.

Email: mavawsec@yahoo.com. Web Site: <http://www.mavaw.com>.



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Sunday, 12th May 1996

Our Ref: mavaw/H2

Your Ref:

*The Honourable John Humphrey,
Minister,
Ministry of Housing and Settlements,
NHA Building,
South Quay,
PORT OF SPAIN*

**SUBJECT: CONTRIBUTION TO
THE COUNTRY REPORT—
HABITAT II CONFERENCE—
ISTANBUL—TURKEY.**

Dear Sir,

Let me first express my sincere gratitude for being able to participate in this most important planning discussion, which included two days of ***Horizontal Dialogue***, at the Hotel Normandie.

Secondly, I extend compliments to you and your team, for producing a forward-looking, sensitive and well-presented **Country Report**.

In my view, said **Report** could well be the most articulate one in Istanbul next month, having focused on the **three (3)** essential areas of **Settlement Planning**, namely: -

- ***Design***
- ***Construction and***
- ***Social Concerns.***

My twenty-two (22) years in **Housing/Settlement Research**, constrains me to note the following **Twelve (12) Points**. Said **Points**, giving further proof to the claim of **“wide cross-section collaboration”** noted in the **Report’s Introduction** at page three (3), **section 1**. {During the 22 years Research, sixteen (16) years maintained a collaborative link with the University of the West Indies, St. Augustine Campus; lecturing on the Subject Interior Design and Decoration for the Extra-Mural Department, now the School of Continuing Studies and producing the large Campus Exhibitions of the Period.}

Point 1. The history of Trinidad and Tobago reveal some exciting ***Social and Cultural Landmarks*** which could stimulate **Tourist**, interest if included in the **Introduction Section** or expanded upon in the verbal Presentation.

Point 2. In **Section 3.2**, The **National Physical Development Plan Strategy to the year 2000**, appears to have been most successful with its **Socio-economic Component**, as evidenced by: -

1. ***The three (3) Government changes over a period of fourteen (14) years, peacefully.***
2. ***The present division in our Political System.***
3. ***The most recent Habitat II—Media and Information Encounter—Shelter For All.***

Point 3. What appears to be missing from being mentioned within **Section 3.2, Sub-section C**, **“Existing Land Management Initiatives”**, but has been developed anyway in the Nation are: -

1. The Waste Recycle Management Initiatives by the Solid Waste Management Company Limited.
2. The collaborative efforts, originating from the University's Campus in St. Augustine, since the first showing of their wares in **April of 1989**, with the **TETRAD Exhibition**. Said efforts seeking to address the **Social and Construction Concerns**, of our teething pains, in **Shelter and Settlement Development** viz.: -
 - a. *Crime.*
 - b. *Gender Equity.*
 - c. *Hurricane Resistant Housing and*
 - d. *Interior Design and Decoration (this initiative being an essential component of the Extra Mural Department now School of Continuing Studies and having a much longer history than the first three a, b and c, immediately above-mentioned).*

Point 4. Section 3.3, Land Use, notes that thirty-four percent (34)% of our land acreage is devoted to **Agriculture**, but our **Annual Budgets** have continuously shown an astronomically **high food bill for imports**. This suggests that until we can effectively feed ourselves by using this **34%**, we must in the **Short Term**, mandate by Deed Stipulations, to all Beneficiaries of housing land, that a percentage (%) of said land, be used for **Agricultural Production**. Community Based Organisations can manage the Collection and Distribution of this new initiative, aptly titled "**Shelter Agriculture**". In addition, to consolidate the current concept of "**Green Architecture**", our **Commercial Construction Projects**, must at every Floor Level, be designed to provide for a percentage (%) of **Agricultural Use**, managed by Staff Co-operatives. **Such Construction and any High Rise Development to be of a non-confrontational type, a "Natural Growth Architectural Principle"**.

Point 5. In the Historical Review at **Section 4 page 7**, the major actors in the **Sector** have concentrated on, construction of housing units and infrastructure, in order to satisfy demand. The **new Policy** will obviously correct this, as the housing equation has since been understood to include, efficient designs and social concerns. It should be noted here though, that the **NGO's** claim to fame does not belong in the provision of housing as stated, financial constraints explained, but in bringing to the attention of the National Community, the equal importance of the other two (2) elements in **Settlement Development**, namely, **Design and Sociology**. This claim humbly acknowledges the co-operation of a miniscule section of the Architectural Fraternity and a steadily growing, aggressive few on the University's Campus in St. Augustine.

Point 6. Under **Section 4.2**, during the second shift of Government's emphasis on Settlements, "Community Development/Revitalisation" was highlighted as the mechanism to address the **Social Concerns of Settlement Development**. The **new Policy** has shown an aggressive awareness of this sub-programme to Shelter, i.e. Settlement and National Development, alongside a healthy respect for the NGO Community.

This scenario promises an exciting period of our **Democratic Growth**. With greater use being made of our **Human and Capital Resources**, on and off the University's Campus, under a **Human Resource Management Policy**, which encompasses the "**Full Cycle Of Human Development**," our example of **Settlement Development** may well bring the first **Nobel Prize** to a small Island State.

Point 7. Under **Section 5, Best Practices**, we need to address the misconception that architects "**sell designs**" as opposed to "**provide solutions to space problems**." The manner in which the majority of practicing architects have dispensed Architecture as a Service in the past, has contributed in the most part, to this misconception. The harmony between **recipients** of architectural services and the rest of the **National Community**, is intimately hinged on the **concept** that, "in any specific discipline, service to humanity is of first importance."

We will continue to have **non-completion** of **Plans and Programmes**, until **Architectural Service** is dispensed with analysis, understanding, problem solving and monitoring, maintaining accessibility as a priority. **Nomination**, the right to use a **Title** after your name and **Licensing**, the right to be the **sole provider of a Service**, will only be equitable and meaningful when “love for all humanity is placed before love for self.”

The magnitude of this **Paradigm Shift** is made obvious when we look at the **numbers**. In Trinidad and Tobago we have sixty-five (65) **Registered Architects**, who are available to service a population of over **1.2 million persons**, i.e.

- **1 Architect per 18,000 persons,**
- **At a Service Rate of one (1) job per year,**
- **1 Architect has must live for 18,000 years and that does not include population growth.**

The solution lies in the **Development and Practice** of “Natural Growth Architecture”, which links **Service with Training** in a manner that allows “**Horizontal Dialogue**” with the National Community, in a never ending fulfilling devotion, another **Principle** in this **Concept of NGA**

Point 8. Under **Section 5.3**, the practice of Public and Private Sector Partnership, will be continued under the **new Policy** and rightly so. However, in my view, the State must retain the responsibility to conduct and compile **Research**, whilst co-coordinating the development of Housing/Shelter Community Co-operatives and Community Based Organisations.

Point 9. In addition, all **mass housing providers** should not only be seen as willing and capable to design Housing Units for Low Income Earners. A **system** should be in place to allow our trained professionals, in the **Public Service** particularly, to expose their expertise to the rich section of Society, as long as there is no conflict of interest; the Numbers dictate such a consideration. (1 architect per 18,000 persons).

Basically, the established Authority on Housing and Settlements in any Society, must relate to: -

1. **Existing Stock, both Formal and Informal, i.e. (planned and unplanned)**
2. **Proposed Stock, designs completed and being approved.**
3. **Future stock,**

Whilst providing and allowing **Solutions** that recognizes the usable existing Natural Growth Experiences, emanating from both planned and unplanned Developments.

Point 10. This innovative composition of the **Joint Consultative Council** still exposes an **opening** for the “**Construction End Organisations**” i.e. one hosting: -

1. **Interior Designers.**
2. **Furniture Producers.**
3. **Plantscapers.**
4. **Artists and Accessories Suppliers.**

The **Council** could be encouraged to try and fill this **opening** and should also become **user-friendlier**.

Point 11. It is refreshing to note, that in the **new Policy**, Gender Issues will be given its just due. The fact that **women** are generally confined to enclosed spaces for ninety-five percent (95%) of the day, combined with the ever-growing realization of the importance of the **Home Management Function** in continuing our existence as a **Civilization**: demands extreme caution in achieving efficiency in **Design Solutions**.

Consequently, the **Male Function** in the Home as Co-parent has to be instructed in the light of our Socio-economic experiences, with the importance of positive **Male Role Modeling**, emphasized vigorously. The **Orientation of Masculinity** must guide our **Males** to be as good a **Protector** and **Provider** as we are **Reproducers**.

Point 12. In support of your conviction Mr. Minister that because of our small size and unique growth pattern, we will eventually see a fusion of Rural and Urban Developments, with identifiable Agricultural Communities. Let me suggest that in the next Review of the **Proposed Urban and Regional Planning Act**, the word “**Ruban**” be used to designate the “**fusion.**”

My two (2) peripheral and final comments are as follows: -

1. The “**Horizontal Dialogue**” as underlined in the **new Policy** has already started, most recent example, the **Media Encounter** at the Normandie. What has to be done to maintain and develop it is as follows: -
 - a. Commence **dialogue** on **Reports** before they are submitted to their destination in the finished form.
 - b. During **dialogue**, greater respect should be shown for the **Floor Participation**, when doing **Reviews and Press Releases**.
 - c. Suggested **Expert Speakers and Ministers** should indicate their availability to spend at least one (1) day at the **Conference**, before their invitation is confirmed. This would allow participants to access these “**Experts**” and allow such “**Experts**” to evaluate the **Inputs** from the **Floor**.
2. A little Introduction to Istanbul and Turkey would have revealed some interesting facts.

The above **12-Point Contribution** will form part of my **Presentation in the NGO Forum**, if I am **selected and funded** to attend as a member of the Non-Governmental Organisation “Men Against Violence Against Women (MAVAW).”

Signed.....Donald Berment, Secretary, MAVAW

Yours In Nation Building
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
G.M. Co-ordinators : David Law, Johnny Bharath.
P.O.R.O.

CLUES TO HARMONY.



HERE ARE some simple clues on how to maintain good interpersonal relationships:

1

1. Speak less, listen more. A Greek philosopher once said that you were given two ears and one mouth so that you can listen twice as much as you speak.

2

2. Remember to always maintain a calm manner. The way in which you say something may be more significant than what you actually say. Actions speak louder than words.

3

3. Keep an open mind. Practise disagreeing without being disagreeable. Seek mutual understanding.

4

4. Avoid showing off. Let people learn from your behaviour. Your successes will speak much more loudly than your words.

5

5. Avoid promises you cannot keep. Share insights with others in a non-judgemental manner.

6

6. Avoid gossip and spreading rumours as well as people who gossip. Try to live your life in a way that anything negative said about you will not readily be believed.

7

7. Be considerate and sensitive to the limitations of others, (especially spouses and children). Understand that we all have anxieties about life and your sensitivity could be the key to another's peace of mind.

8

8. Appreciate others as real human beings with feelings and needs for self esteem and recognition. Believe that each person has just as much right to be walking this earth as you do.

9

9. Show interest in others. They have thoughts, circumstances, families and a future. Make it your business to find out what makes them tick.

10

10. Remember that it takes 72 muscles to frown and only 14 to smile, so look on the bright side of everything. See life's difficulties as challenges and not as problems or obstacles.

All that is needed to put these into practise is a willingness to try something different and to change the course of your life.

Illustrations: CARLENE DE BOURG



DATE RAPE DANGER SIGNALS LOOK OUT FOR THESE GUYS!

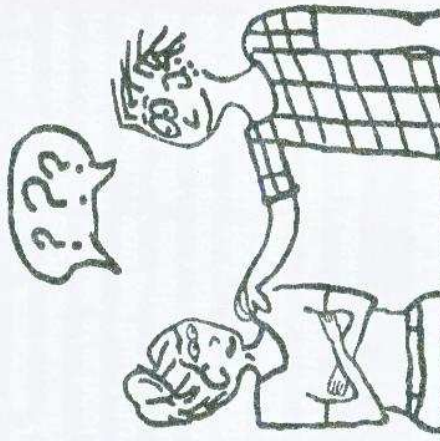
Pay attention to controlling behaviour that doesn't seem or feel right like:

- guys who don't listen to you, ignore you or talk over you, criticize what you wear, etc. These guys have no respect for women.
- guys who sit or stand too close to you, make you feel uncomfortable and enjoy making you feel this way.
- guys who power stare, like when a guy is looking right through you or down at you.
- guys who do only what they want or push or grab you to get what they want.
- guys who express anger and violence towards women either through words (e.g. You _____ I'm going to kill you) or by pushing, shoving or biting.
- guys with a bad attitude toward women (e.g. women are meant to be seen and not heard. A woman's place is in the kitchen so that she can serve a man).
- guys who are overly jealous or possessive, this is not a compliment, these guys can be very controlling.
- guys who drink or use drugs heavily.
- guys with a reputation for scoring.

They are likely to pressure you for sex when you go out with them.

From "Lindsays Story" by the
Mississauga Hospital Sexual Assault Team
Permission to reprint freely for classroom use.

Date Rape?



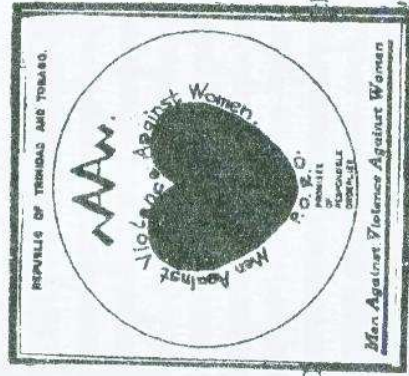
OR HEALTHY
CHOICES...

WHAT CAN YOUNG WOMEN DO?

COMMUNITY SUPPORT FOR ENDING DATING VIOLENCE

Avalon Sexual Assault Centre
Halifax, 425-0122

Chrysalis House
Kentville, 1-800-264-8682



Kentville, 679-1411

Second Story Women's Centre
Bridgewater, 543-1315

MAVAW - Hot - 637-0924
Hot - 668-5133

888-623-9302
888-623-0193

People in Healthy Relationships:

- spend time together and time apart
- trust each other
- respect their mutual feelings
- talk openly about sexual needs and desires
- are sensitive to each others feelings
- are friends
- have common interests
- communicate their feelings honestly and openly

DATE RAPE

You can't always avoid date rape and unfortunately there's no perfect way to protect yourself, however there are things you can do to lessen your chances of being sexually assaulted.

REMEMBER

85% of all sexual assaults of teenagers occur between people who know each other (e.g. a date, a friend or someone you've just seen around). People are sexually assaulted in their homes, in cars, at school, at parties, at the beach... you get the picture. You've been sexually assaulted if you've been forced or pressured into going further sexually than you feel comfortable with. In other words, if you've been kissed, touched or had intercourse without agreeing to it, that is Sexual Assault.

SEXUAL ASSAULT IS AGAINST THE LAW

It is always the guy's responsibility to control his behaviour and accept your sexual limits. It is the girl's responsibility to communicate these limits.

WHAT WOMEN CAN DO

Look at your feelings about sex and set sexual limits. You may have different limits at different times with different people but you should know what you do or don't want before you're parked at the drive-in with your date.

Tell the other person those limits. Yes should always mean yes and no should always mean no. Saying yes to necking does not mean you've said yes to intercourse. Let him clearly know how far you want to go and that you won't go any further. This has to be talked about because body language is too confusing and ESP doesn't work.

Be aware of signals you send with your posture, clothes, tone of voice and eye contact. Women NEVER are asking to be sexually assaulted by how they look or act but many men may misinterpret these signals and think women want "it" when they really don't.

Beware of guys who use come-on lines like these to get you into bed:

PRESSURING FOR SEX - "you loved me you would" "You're not the only girl I could date"
TRYING TO MAKE YOU FEEL BAD OR GUILTY - "Don't you like me?" "Are you weird or something?"
BLACKMAIL - "I'll kill myself if you break up with me" "I'll tell everyone you did anyway"
THINKS SEX IS HIS RIGHT NO MATTER WHAT - "You turned me on, now you have to do it"
"We've had sex before so you can't say no now"
DOESN'T TAKE NO FOR AN ANSWER - "You can't say no because I spent all that money on you"
"You really want it. You're just saying no to protect your reputation, girls are supposed to do that"

Make sure you are clear when something is happening that you don't like. If necessary use powerful and firm voice that says "STOP THIS-I'M NOT ENJOYING IT!". If you don't let him know what you do or don't like or that you want him to stop, he might think this silence means you want to go further.

TRUST YOUR FEELINGS. If you feel you are being pressured into unwanted sex - YOU'RE RIGHT! you are feeling uncomfortable at a party or wherever - LEAVE. Pay attention to changes in your feelings. A situation may feel okay at first and then change - LEAVE if this happens.

Be independent and aware on a date. Have opinions about where to go and what to do, so your date knows you're not a pushover. At first, you may want to meet in a public place or go on a double date. You may want to pay your own way, so you don't have to feel you owe him. Always have your own transportation home or enough money for taxi fare or at least a quarter to call a friend/parent for a ride. Also be aware that drugs and alcohol often go hand in hand with date rape because they lessen your ability (and that of your date) to make responsible decisions.

Hang around with people who share your values. They are less likely to pressure you to do something you don't really want to do.

Dealing with Conflict

DDB 6/8/98

Conflict is normal in relationships.

Because each person is unique, whenever two or more persons live together, differences of perception, interpretation of events and opinion will be inevitable.

There are four main ways to deal with conflict.

1. Flight:

Running away from any sign of disagreement; refusing to acknowledge or talk about differences.

This is appropriate when the time and/or place is not right for dealing with a particular problem. It is particularly appropriate when safety is at stake.

It is not appropriate as a general style of dealing with conflict because it prevents settling of difficulties and results in a build-up of bad feelings, as disagreement piles on top of disagreement.

2. Diversion:

Delaying discussion by deflecting attention away from the problem by changing the subject, criticizing, keeping issues unclear or unacknowledged.

This too is appropriate if safety is at stake. It is also appropriate if one needs time to think or the time and/or place is not right for dealing with the problem.

It is not appropriate if used all the time to avoid dealing with problems.

3. Fighting:

Imposing one's will on another person in whatever way it takes to do that; usually by using verbal abuse or physical violence.

Fighting is usually a reaction to feeling threatened. It is never an appropriate way to resolve a conflict. People get hurt. Victories are hollow and unless the opponent has no will at all, short-lived. The conflicts do not get settled. They just go underground and smoulder.

4. Constructive conflict resolution:

Resolving conflicts with actions that are mutually satisfying

Constructive conflict resolution allows problems to be dealt with directly and positively instead of being avoided or covered over. It requires the ability and willingness to figure out the real source of the conflict; initiate constructive action and communicate in positive ways until the problem is solved.

07/89



off- 623-9302

fax- 623-0193

Hot Lines

668-5133

Mr. Donald Berment
Management Co-ordinator
Men Against Violence Against Women
45 River Estate Cir.
River Estate
Diego Martin Ph : 637-0924.



DD B
6/8/98

Constructive Conflict Resolution

Constructive conflict resolution will only work if both persons genuinely want to resolve the conflict. If one or both persons are only interested in winning or maintaining control, then it won't work.

Step 1: Figure out the real source of the conflict

Is the disagreement about fact, perception or opinion? If it is about fact, check it out with some reliable source. If it is about different perceptions, be aware that everyone has a unique way of perceiving the world. If it is a difference of opinion, know that people's opinions are based on their values and the real source of conflict may be grounded in a difference in values.

Step 2: Decide whether this is the right time to deal with the conflict

If one or both persons is too upset or if it is not the right place or there is not enough time to work through to a solution, postpone dealing with it. But do not postpone indefinitely. Agree on a time to deal with the problem and deal with it then.

Step 3: Search for agreement together

a. Listen to each other.

When the other person is speaking, give your whole attention to what s/he is saying, both the actual words and the feelings behind the words. Do not think about your own feelings or what you are going to say next, while the other person is speaking. If this is difficult to do, make a rule that each person must say what s/he believes the other person is saying and feeling and have it checked out for accuracy before expressing his/her own self.

b. Check what you think you heard.

There is a saying that describes how complicated communication is:

I know that you believe you understand what you think I said, but I am not sure you realize that what you heard is not what I meant.

Always be sure you are understanding the other person. Do not assume you do. It is best to check out your assumptions before proceeding. Many disagreements are based on wrong assumptions.

c. Stay on the issue.

Avoid the pitfalls of bringing up past issues, mind reading and name calling.

d. Consider many alternative solutions and choose one together to try. If it does not work, choose and try another until both of you are satisfied.

Remember:

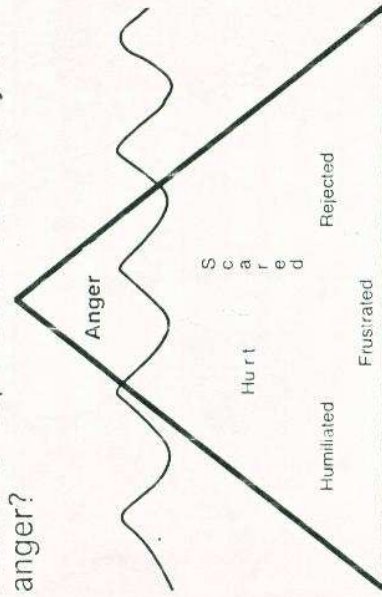
A good relationship is not one without conflict. It is one in which the participants can resolve conflicts so that no one is hurt or oppressed; so that everybody wins.

The Anger Iceberg

Try this anger awareness exercise and see if it helps you understand this complicated emotion.

Suggestion

1. Draw an iceberg on a piece of paper like the example below. Label the tip: "anger."
2. Think about a situation in which you felt angry.
3. Write what you did with your anger in the space above the water line.
4. See the "Taking Action" section on the other side of this sheet. What behaviour choices did you make to deal with your anger? What happened as a result?
5. Since anger is a secondary emotion, what were the underlying feeling(s)? Write them beneath the tip.
6. Was the problem solved OK? Do you still need to tell the people involved how you felt?
7. Evaluate your choices. What might have happened if you had chosen an assertive response to deal with your anger?



Adapted with permission from Skills for Violence Free Relationships, by Barrie Levy. Copy Freely

Anger Triggers

It's important to notice the signals our body gives us when we start to feel angry. If we can catch these signals we have a much better chance of gaining control of our anger before we hurt ourselves or someone else. What are your anger triggers?

External Triggers are what happens to us, like when someone lies or puts us down

Internal Triggers:

These are the messages we give ourselves, "self-talk," that get us all worked up. They are sometimes based on assumptions or incorrect information.

"I" Statements

Learning to talk about how an experience affects us can be a challenge.

Using the following "I" statement formula might help you to communicate clearly what's going on.

I feel _____
when you _____,
and I need you to _____.

Example: Jim tells a racist or sexist joke.

Option 1: "What an idiot, go get a life!"

Option 2: "I feel offended when I hear sexist jokes and I don't want to hear anymore."

Which response is constructive?

How could this work for other situations: sexual harassment, bullying, etc.?

How to deal with



ANGER

Hot Lines
637-0924
668-5133

985-623-9302
985-623-0193

Men Against Violence Against Women
P.O. Box 10000
Toronto, Ontario M6H 1A1
REPUBLIC OF THIRIAS AND THIRAS

Taking Action

THREE Behaviour Choices

1. **AGGRESSIVE:** Anger is expressed either physically, emotionally or psychologically. The result is that someone else is hurt.

Behaviour choices: Hitting, kicking, harassment, using put-downs, threats, murder
Message to myself: My anger is not OK so I am going to take it out on someone else. I will blame them for my anger because I am uncomfortable with my own feelings.

2. **PASSIVE AGGRESSIVE:** Anger is repressed by internalizing and denying.

Behaviour choices: Cold shoulder, revenge, nasty rumours, depression. (Depression is defined as anger turned inwards.) Bottled up, it can eventually blow up.

Message to myself: My anger is not OK so I will deny it. I am afraid of my feelings.

3. **ASSERTIVE:** A. Anger is expressed directly in non-threatening ways that do not hurt a.) yourself, b.) another person or c.) someone's property.

B. Anger is suppressed (Not repressed). Acknowledge the feeling and decide to deal with the situation at a more appropriate time in the near future (e.g., after school).

Behaviour choices: Make "I" statements that clearly express your feelings/ what you need from the other person: time out, private yelling, journal writing, physical activity.

Message to self: My anger is OK and my feelings are an important part of who I am.

Anger: The Second Emotion

Anger is actually a secondary emotion. The real challenge is to get in touch with the primary emotion(s) that are at the heart of the matter (i.e., under the tip of the anger iceberg). Only then can the problem be dealt with in healthy and assertive ways.

Remember:

Nobody "makes" you angry. In any situation you have the **power to choose** and the ability to get in touch with your own feelings and to deal with them without hurting anyone. There is no such thing as bad anger or good anger. There are only choices as to how you deal with anger. You can either reject and harm others or accept and respect others and yourself.

What To Do When You Are Angry

1. Recognize angry feelings:

- How does my body feel?
- What are my internal triggers?
- External triggers?

2. Calm down:

- Take three deep breaths
- Count backwards slowly
- Get out of the situation
- Talk to yourself positively

3. Think about the consequences before you make a choice. Am I being:

- Aggressive?
- Passive Aggressive?
- Assertive?
 - expressing feelings directly
 - suppressing them for now
- Is it safe? Is it fair?

4. Identify your deeper feelings and decide if you want to act to solve the problem or not:

- Use an anger iceberg
- Talk it out
- Use "I" statements

5. Think about it later:

- What worked?
- What didn't work?
- What could I do differently?
- Did I do a good job?

**HOW WOULD YOU DESCRIBE YOUR RELATIONSHIP, TOXIC OR HEALTHY?
TOXIC INTIMACY VS. HEALTHY INTIMACY**

TOXIC INTIMACY

HEALTHY INTIMACY

Obsession with finding "someone to love"

Development of self as first priority

Need for immediate gratification

Desire long term contentment; relationship develops step by step

Pressuring partner for sex or commitment

Freedom of choice

Imbalance of power

Balance and mutuality in the relationship

Power play for control

Compromise, negotiation, or taking turns at leading

No-talk rule especially if things are not working out

Sharing wants, feelings, and appreciation of what your partner means to you

Manipulation

Directness

Lack of trust

Appropriate trust (that is, knowing that your partner will likely behave according to his/her fundamental nature)

Attempts to change partner to meet one's needs

Embracing of each other's individuality

Relationship is based on delusion and avoidance of the unpleasant

Relationship deals with all aspects of reality

Relationship is always the same

Relationship is always changing

Expectation that one partner will fix and rescuer the other

Self-care by both partners

Fusion (being obsessed with each other's problems and feelings)

Loving detachment (healthy concern about partner's well-being and growth while letting go)

Passion confused with fear

Sex grows out of friendship and caring

Blaming self or partner for problems

Problem solving together

Cycle of pain and despair

Cycle of comfort and contentment

(A compilation by Jody Hayes, Smart Love. Jeremy Tarcher, Inc., 1989 and based on information supplied by Chicago therapist Terence Gorski)



OIOB Tue 3/12/96

SIGNS OF DOMESTIC VIOLENCE

PHYSICAL ABUSE

- Threatens to hurt or kill you or your family
- Pushes or shoves
- Holds you to keep you from leaving
- Kicks or chokes
- Hits, slaps or punches
- Throws objects at you
- Locks you out of the house
- Abandons you in dangerous places
- Refuses to help you when you are sick or injured
- Subjects you to reckless driving
- Rapes or coerces you sexually
- Threatens to hurt you with a weapon
- Abuses your pets
- Breaks furniture, belongings or personal effects

SEXUAL ABUSE

- Harasses you about imagined affairs
- Is jealous and assumes you will have sex with any available person
- Insists on unwanted or uncomfortable touching
- Withholds sex and affection
- Forces you to undress when you don't want to
- Publicly shows sexual interest in other people
- Has affairs after agreeing to a monogamous relationship
- Forces particular unwanted sexual acts
- Forces sex when you are sick or when it is a danger to your health
- Forces sex for the purpose of hurting you with objects or weapons
- Commits sadistic sexual acts
- Tells you about affairs
- Rapes you or coerces you sexually

EMOTIONAL ABUSE

- Ignores your feelings
- Ridicules or insults your most valued beliefs, your religion, race, heritage or class
- Continually criticizes you, calls you names, shouts at you
- Humiliates you
- Regularly threatens to leave you or tells you to leave
- Punishes you or deprives the children when angry at you

EMOTIONAL ABUSE(Continued)

- Threatens to kidnap the children if you leave
- Manipulates with lies and contradictions
- Keeps you on an emotional roller coaster
- Continually finds fault with what you do and how you do it
- Tells you you're stupid, incapable or inadequate
- Tells the children what a bad parent you are
- Tells you you're too fat or thin
- Disallows any success and good feelings

SOCIAL ISOLATION

- Doesn't allow contact with your family
- Doesn't allow you to have your own friends
- If allowed friends, punishes you for having them, calls them names, questions, accuses or picks at you until you stop the relationship
- "Mutual" friends are abusers/victims or chemically dependent
- Keeps you prisoner in your own home
- You live on the abuser's time clock; you're where the abuser wants when the abuser wants you there
- Refuses to socialize with you or take you anywhere
- Denies you access to the car

FINANCIAL DEPENDENCY

- Keeps you and the family in debt
- Keeps you from working
- If you're employed, causes trouble at work; tries to get you fired
- Keeps you underemployed or working at a job you dislike
- Controls money or resources; everything is in the abuser's name
- Refuses to work or share money
- Makes you ask for money

9

COMPARE YOUR EXPERIENCE WITH THIS LIST OF ABUSIVE BEHAVIOR. IF THESE STRATEGIES ARE PART OF YOUR LIFE, YOU ARE A VICTIM OF DOMESTIC VIOLENCE.

Call (800) - SAVE, (800) 7283 - The Domestic Violence Hotline for further information, if you need help.

Taking Action

IF YOU WITNESS A FRIEND BEING ABUSED, OR IF A FRIEND TELLS YOU THAT THEY ARE BEING ABUSED IN A RELATIONSHIP ...

- ♦ listen calmly and take the concern seriously
- ♦ reassure your friend that nobody deserves to be abused
- ♦ support your friend in looking at the risks of more abuse
- ♦ suggest talking to a trusted adult such as a teacher, guidance counsellor or call one of the agencies listed on this pamphlet
- ♦ realize the situation will not change overnight

A FRIEND TELLS YOU THAT THEY ARE ABUSING THEIR PARTNER ...

- ♦ support them for recognizing the problem
- ♦ suggest talking to a trusted adult such as a teacher, guidance counsellor or call one of the agencies listed on this pamphlet

IF YOU WITNESS A FRIEND ACTING IN AN ABUSIVE MANNER (VERBAL OR PHYSICAL) TOWARDS THEIR PARTNER ...

- ♦ tell your friend that nobody deserves to be abused
- ♦ help your friends in looking at the risks of more abuse

Give this pamphlet to a friend

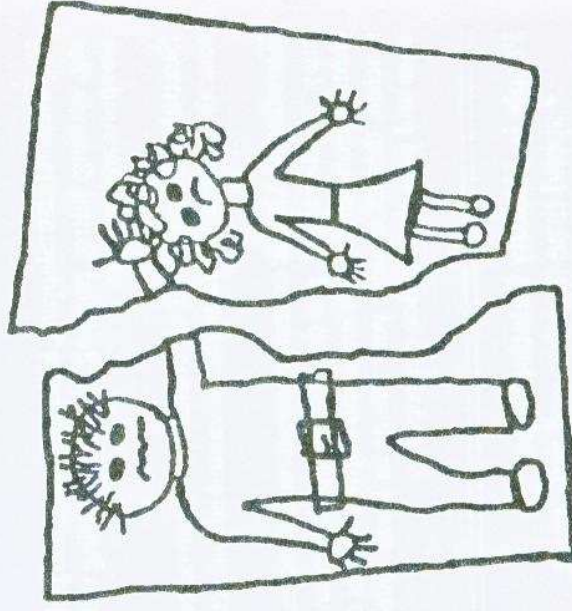
IN THE AREA OF PREVENTION ... STUDENTS CAN ...

- ♦ watch for danger signs when dating, like guys who try to control you (eg. what you wear), embarrass you in front of friends or are jealous for no good reason.
- ♦ encourage friends to share ideas and concerns to end the silence.
- ♦ promote healthy ways to deal with anger and resolve conflict.
- ♦ be aware of jokes, movies, T.V. programs, advertising and rock videos that are demeaning to women and may promote violence against women.

Violence IN

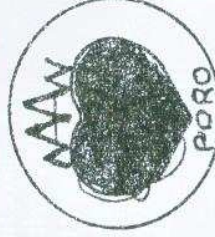
RELATIONSHIPS

STUDENTS CAN MAKE A DIFFERENCE



Recognize, talk, listen, share, support and

"End The Silence"



Mr. Donald Berment
Management Co-ordinator
Men Against Violence Against Women
45 River Estate Cir.
River Estate
Diego Martin Ph : 637-0924

630-643-4602
Fax - 623-0193
Hot Line - 637-0924/5133
LOCAL AGENCIES THAT CAN HELP

National Domestic Violence Hotline	800-7283
Aids Hotline	625-2437
Alcohol & Drug Abuse	627-0733
Deaf School: (Port of Spain) (San Fernando)	624-3661 658-5479
Family Planning Association	623-4764
Families in Action	628-2333
Destitute & Terminally Ill (Hospice)	622-1424
Fire	990
Hospital: (Port of Spain) (San Fernando) (Tobago)	623-7715 652-3581 639-2551
Human Rights	652-4504
Legal Aid	652-0454
National Family Services	625-6464
Police	999
Probation	623-8248
Rape Crisis Centre (Port of Spain) (San Fernando) (St. Ann's Hospital)	622-7273 657-5355 624-1151

Violence in Relationships

At least one out of ten women in Canada is battered by her partner.

85% of all sexual assaults of teenagers occur between people who know each other.

At least one in nine high school students report involvement in an abusive relationship.

WHAT IS VIOLENCE IN RELATIONSHIPS?

Violence against women refers to physical or psychological violence by a male towards his partner. You do not have to be married to be a batterer or a victim. You may be in a boyfriend/girlfriend relationship. Being a victim of violence can include one or more of the following:

Physical Abuse: Slapping, kicking, hitting, hairpulling, spitting, biting, pushing, shoving, beating with weapons and murder.

Sexual Abuse: forced or coerced sex, unwanted touching, sexual accusations, unwanted sexual acts.

Emotional Abuse: extreme possessiveness and jealousy, name calling, put downs, manipulation and control, isolation from friends and family, threats of suicide, threats against your life or to harm loved ones and pets, destruction of property

People in Healthy Relationships:

- spend time together and time apart,
- trust each other,
- respect their mutual choices and differences
- are sensitive to each others feelings,
- are friends,
- have common interests,
- communicate their feelings honestly and openly.

WHY DO MALES USE VIOLENCE AGAINST FEMALES?

Because they...

- have learned this behaviour in their family of origin (75% of batterers have witnessed their father assault their mother).
- try to maintain a tough macho image reinforced by society and the media.
- believe it is an appropriate expression of male power and control.
- have low self esteem and want their partner to remain dependent on them.
- know there are few, if any consequences for violent acts.

WHY DO FEMALES APPEAR TO ACCEPT VIOLENCE IN RELATIONSHIPS?

Because they...

- want their relationships to work and hope their boyfriends will change.
- fear their boyfriend will hurt them or seek revenge.
- feel guilt or shame.
- see no other alternative, unaware help is available.
- believe their boyfriends need them.
- have no social or personal supports.
- a boyfriend who is occasionally violent is better than no boyfriend at all.
- believe that the violence is normal.
- think the violence will go away after they get married or have children.

Facts & Fallacies

Myth: Violence against women affects an isolated segment of the population.
Fact: Violence against women happens across classes, cultural/ethnic groups, in rural and urban environments. There are no exceptions.

Myth: Alcohol causes a man to beat his partner.
Fact: Alcohol is often used as an excuse for the violence, but it is never the cause. Some men beat their partner both when they drink and when they are sober. Also, some men who never drink beat their partner.

Myth: Women provoke the violence and therefore deserve what they get.

Fact: The term "provoke" suggests that there are some behaviours that justify assault. This is not true. Provocation is an excuse the offender uses to avoid responsibility for his own behaviour. There is no excuse for violence against women.

Myth: Women enjoy the abuse and find it sexually stimulating.

Fact: Women do not find pleasure in the abuse. It is not a sexual turn-on. This assumption is demeaning, disrespectful, and is one more way to blame the victim.



REPUBLIC OF TRINIDAD AND TOBAGO

Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. 383-6184 Fax: 637-0924.

Email: mavawsec@yahoo.com. Website: <http://www.mavaw.com>



Dr. Russell Foote, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Fri/27/June/08

Our Ref.: mavaw-GT

Your Ref:

TO ALL CONCERNED

Gender Training Must Not Only Be Done But It Must Be Seen To Be Done!

In the event that the following **COMMENTS** may be considered without the balanced "Gender Lens" so necessary in order to achieve a "Culture of Peace", let me first extend my gratitude, deep appreciation and compliments to the UNFPA and the Ministry of Community Development, Culture and Gender Affairs, for an excellent attempt to continue the understanding of "Gender and Development," with their joint 2-day Training Workshop titled, "Gender And Sexual And Reproductive Health And Rights," at the Crowne Plaza Hotel on the 11th and 12th of June 2008.

In my view, a genuine attempt was made to place the role of and concerns of men fully alongside the role of and concerns of women, within the context of sexual and reproductive health, to the extent that each participant was given a beautiful Manual, CD and Certificate of participation, at the end of the Training, all 49 women and 9 men.

My **FIRST COMMENT**, lies in a sentence which we are familiar with and which sets the tone for development in all areas of life i.e. "Justice Must Not Only Be Done But It Must Be Seen To Be Done"

Everyone acknowledged the absence of men at this Training Workshop, there being 9 men and 49 women and us **MAVAW** men also noted the absence of a male presenter in the sessions dealing with "Men's Role in Reproductive Health" and "Gender, Violence and Human Rights". The latter made more poignant, as we are fully aware of a Male Support Unit within the Ministry, with members who host Radio Programmes and conduct training and we assume that the UNFPA have male members of staff capable of presenting. So you will forgive me when I repeat here the subject head of this correspondence, Gender Training Must Not Only Be Done But It Must Be Seen To Be Done!

The three Directors of **MAVAW** who were present, had been very vocal during some of the sessions and a measure of discomfort was noticed, when some comments articulated past experiences of contributory elements to Gender Based Violence, to the point where the closing commentator, Ms. Monica Williams remarked and I quote, "MAVAW started off as being against violence against women and now they seem to be changing direction," unquote.

To set the record straight, a CD is available which explains the Concept, Philosophy and Direction of "Men Against Violence Against Women (MAVAW)", since its inception in 1994 and said CD is supplied free of charge on request.

We have categorically stated that our men are not only concerned with the violence against women by men, but also the violence to women perpetrated by women and the latent potential catalyst for violent behaviour, intimately and most times subtly, inherent in policies, practices and procedures which contribute to the initiation of violence against women, the latter existing at all levels and in all social groupings and can be classified as Gender Based Violence.

In other words, **MAVAW** men have been pioneering the concept of Gender Based Violence over the last 14 years, since 1994, totally focused on action-based projects on our own and in support of other NGO's, methodologies targeting behaviour change, outreach activities via the media and at conferences, desktop published material and sharing the textbook knowledge of our members who are publishing their work.

Additionally, **MAVAW** men have followed a holistic approach to understanding "Violence Against Women", in that we analyze violent behaviour at 3 levels, MACRO, MEZZO and MICRO and position this analysis at the MACRO Level, within a Syndrome we title "The BSD Syndrome".

At the MACRO Level, all direct physical, emotional, financial violence is considered.

At the MEZZO Level all latent potential catalysts for violent behaviour towards women, inherent in policies, practices and procedures are considered.

At the MICRO Level, all the pain and suffering experienced by the loved ones of the women being violated is considered i.e. the feelings of sons, fathers, grandfathers, uncles, daughters, mothers, grandmothers, aunts etc., even the acceptance that within the body of the women is the biological contribution of both her mother and father.

So that when Gender Training is planned and the Organisers are unable or unwilling to put men at Presenter level, they are contributing to the violent thought that men are incapable or unwilling to accept their role and responsibility to contribute to the process of finding solutions to Violence Against Women, bearing in mind that GENDER is analyzed in relation to both men and women and such behaviour may be considered Gender Based Violence.

When said Organisers invite NGO and State bodies with male and female members and do not suggest or state that of the 2 invitees, one must be a male they are also continuing a practice, which excludes/denies men a participatory role in change and I am reliably informed that recent research is pointing to this practice of deliberate male disenfranchisement as a contributory factor in male underachievement and minority presence at learning institutions.

To finish my FIRST COMMENT, we of **MAVAW** hope that the research mentioned in the paragraph immediately above, continues to the extent that all receiving application operations, staffed solely by women are monitored closely to avoid the suspicion that Gender Based Violence against men is being practiced.

MAVAW sat on 2 (two) of the most important Cabinet appointed committees in the recent past. The first one was for The Reform of the Domestic Violence Act, 1991 and Related Legislation from January 1997 to June 1997 and on which there were 5 men and 13 women. The second one was the Multi-disciplinary Committee to Examine the Status of the Family in Trinidad and Tobago from July 2003 to August 2004 and on which there was 7 men and 11 women and from these two experiences comes my SECOND COMMENT, which example Gender Based Violence at the MEZZO Level.

In the June 1997 Report of the Reform of the Domestic Violence Act 1991, signed by the Committee, we agreed that a Protection Order was to be extended from the present time of 1 year to a period of 2 years and a person can be excluded from a home from the present time of 3 months to a period of 1 year.

The men were also united in their caution to Minister Kamla Persad Bissessar, the Chair of the Committee, that a prominent media campaign must precede the introduction of these changes and adequate personnel must be added to the Probation Department and the National Family Services to provide for any fallout of these new measures and any hardships, which may accrue.

To our surprise, the law brought to Parliament provided for a 3 year Protection Order, which we could have lived with and the possibility of a 3 year exclusion from the home by an offending party, which the men were very dismayed about primarily because not 1 (one) media advisory was made or additional personnel hired to buffer the harsh consequences of action the Court was now capable of. Our history recorded some of the most horrific family fatalities in the next three years following the introduction of this Act and in my view, this a perfect example of how Gender Based Violence can be committed to women by women at the MEZZO level.

In the August 2004 Report of the Multi-disciplinary Committee to Examine the Status of the Family in Trinidad and Tobago, we submitted 52 recommendations to Minister Mustapha Abdul Hamid, some of which were to be done immediately. To our surprise the Minister brought 10 recommendations of his own for us to sign, telling us that those 52 recommendations we made were too much for the Cabinet to read. No one signed them, but his recommendations were taken to Cabinet anyway. Today six (6) years hence we are seeing signs of what neglect to follow scientifically researched solutions achieves and the Minister's behaviour is another perfect example of how Gender Based Violence can be committed by men towards women at the MEZZO level.

To finish my SECOND COMMENT, we of MAVAW caution all those committed to achieve a "Culture of Peace" in our beloved Trinidad and Tobago, to be conscious of the fact that there are men and women who require additional help to deal with their personal issues and will innocently or intentionally delay the solutions for behaviour change if they are not properly monitored. Unfortunately, some of these men and women are at very important decision making levels in our society and those decisions affect many citizens, a large number not having a clue as to where is the source of their pain and suffering.

My THIRD COMMENT is peripheral to the belief of some women that they are best equipped to direct how men must talk to men. We have heard of and know of many women who are bringing up their sons without help from the child's father or positive male influence and with the feeling that they can role model to their sons how to be a man. This misconception must be addressed at the individual family, community and national levels.

Women can bring up sons, they cannot bring up men. Similarly men can bring up daughters, they cannot bring up women and this fact has to be accepted if we are to stop the examples of Gender Based Violence, which emanates from that belief and a few examples are given below: -

Recently MAVAW started a radio programme with 103 FM, titled "Family Values", which is aired every Wednesday from 10am to 11am in their Studio, on Level 4 of the Long Circular Mall and which was to run for 13 weeks, with the option to renew for another 13 weeks. This station has an audience of 200,000 persons and spans all strata of society, which is an excellent opportunity to assist the nation with Family Development and the achievement of a "Culture of Peace".

Because MAVAW is not funded by any state or private corporation we are always strapped for the necessary cash to maximize these fantastic opportunities. We however wrote the Ministry of Social Development on the 16th April 2008 and requested a small sum of TT\$ 6,325.00 to provide Books and CD's to distribute to listeners. To date we have completed 10 programmes and the Ministry is still considering our request, a Ministry that returns hundreds of thousands of dollars, budgeted for, but not used for social development yearly and a Ministry with 95% of the top Managers being female. In addition the two books we are planning to distribute have been self published by two of our members who are qualified, well respected professionals. Dr. Robert Moultrie is a medical doctor who trained for 8 years in the USA and Dr. Kenneth Niles is a lecturer at our University of the West

Indies. “The Power and Influence of the Parent Child Relationship” by Dr. Moultrie and “Stepping Out—Man to Man” by Dr. Niles were analyzed by a female psychologist at the department of the Ministry called National Family Services, which is 98% female dominated and she found that those books by men reaching out to other men were not suitable for distribution, so she will not recommend that we get the funds to purchase them.

These books are in our bookshops including the UWI Bookshop and here is a woman telling men, not only what to say to men but when, how and where to say it. In my view, this is Gender Based Violence at the most destructive level, where it prevents positive male role models from reaching out to other men, using our taxpayer’s money to do it.

How long has this kind of thing been happening and what has been the influence of this kind of behaviour on our young men and women in society? This is another area for Gender Bias Research, to be done, in my view.

Another example of this kind of behaviour occurred on 12th July 2007 when MAVAW was doing a Radio Programme with 91.1FM of the CNMG group, titled “Inside the Male Mind—women can’t hear what men do’h say”. The topic for the day was “Men Working With Executive Women” and Mr. Kerwin Eagle of the Male Support Unit of the Ministry of Community, Culture and Gender Affairs was in the Studio with us. When we asked Kerwin to comment on the Topic, he informed us that he did not get permission from his female boss to talk on the programme. This is a man employed to help other men from a Male Support Unit in the Ministry, paid by the taxpayer, but cannot talk about issues that affect men in the workplace and on a Programme exposing the thoughts, feelings and beliefs of men for analysis, sharing, research and future training programmes.

My final COMMENT notes that for some time now male and female voices have been raised on the vexing absence of male teachers in our primary school system and father absenteeism. We have a Young Men’s Christian Association and a woman is the head. We have Young Women’s Christian Association and no men are at Board Level. MAVAW was a participant in a 3 day Train the Trainers Programme for Fathers held by “The Institute for Promoting Responsible Fathers” at the St Augustine Regional Complex on the 7th, 8th and 14th of June 2008.

On 2 occasions representatives from the Ministry of Social Development attended to assess the programme, since they approved the funds for it and on both days, female staff members attended. Does this Ministry have any men who can have a say in men’s work?

Last month was declared by the United Nations as the International Month of the Family with a focus on Responsible Fatherhood. Are the men in senior positions in society aware that the absence of men in the workplace could be a direct consequence of female bias and Gender Based Violence towards men; ultimately affecting the same women in society we are all trying to protect?

We sincerely hope that that these comments are taken in the same vein of thought that they are given. Men Against Violence Against Women (MAVAW) is committed to creating a “Culture of Peace” and if placing some painful facts on the table assist this goal, full speed ahead.

To all our friends and members, we are embarking on a subscription/donation drive in order to start training programmes soon. Our Bank is RBTT Bank Limited, 55 Independence Square, Port of Spain, Trinidad W.I., Swift No. for Wire Transfers is RBTTTTPX, Account Number is 8811041956, Customer name is Men Against Violence Against Women and we have Charitable Body Status.

Signed Donald Berment, Secretary.

*Company No M 1799(95) Charitable Status No F (BUD):7/4/205
RBTT Account No. 8811041956.*



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. 753-0804 Fax: 637-0924.

Email: mavawsec@yahoo.com. Website: <http://www.mavaw.com>



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Sunday 1st August 2004

Our Ref.: mavaw/NGA-1

Your Ref:

INTRODUCTION.

NATURAL GROWTH ARCHITECTURE (NGA) —A REALITY AND OUR FUTURE.

Architecture is defined as the science, art or profession of designing and constructing buildings or other structures.

“Architecture through the ages, has evolved and adapted to meet the changing needs of Nations in their religion, politics and of events which reflects the rising cost of land and advancing technology with its designs of multi-storey buildings, of reinforced concrete, glass and steel.” The Secretary, Trinidad and Tobago Institute of Architects, 1990.

“Architecture is undoubtedly one of the most enjoyable professions. It offers a wealth of interest in a variety of fields, which few other professions can match and provides an emotional satisfaction, which only the other arts can stimulate. It exacts a high price for this enjoyment however, and in order to derive the fullest pleasure from it, the architect must devote himself completely to its- study and practice. The more proficient he can become and the greater the mastery he can acquire, the more complete will be his enjoyment. At the same time he has a very real responsibility towards his fellow men, for the buildings and environments which he creates may well have a profound effect on their lives and those of their children.” Arthur Willis and W B George “The Architect In Practice” Fifth Edition 1974 page 1.

The following are the subjects on which lectures are given and examinations set, as part of any comprehensive course in architecture: -

1. Construction and Design.
2. Nature of Materials.
3. Theory of Structures.
4. Law.
5. Services.

The architect's duties briefly consist of: -

1. The design of the building.
2. The preparation of working drawings and contract documents.
3. The arranging of the contract.
4. The supervision of the work whilst in progress.
5. The certifying of interim payments and the examination of final accounts (including their checking if no quantity surveyor is appointed).

In my view, architecture as had been practiced to date, has failed us miserably, both in the training and education of future architects and in the service to humankind, in spite of the advice and guidelines laid down by our most committed architects.

This failure has been recorded dramatically in developing countries and can be seen in the following ways: -

1. Developments that require continuous security and isolated from its surrounding neighbours.
2. Mass housing solutions which creates serious social problems, some like crime, poverty, and domestic violence increasing at alarming rates.
3. Housing developments very underutilized by its residents.
4. The image of the collar and tie, nose in the air professional, given by most architects and in the manner with which they showcase their work to the public, saturated with condescension for the less fortunate so trained.
5. The focus in training programmes is to become an architect and service clients, as opposed to making a positive contribution to the art and practice of architecture as a service to humankind.
6. In every country where architects practice, there is an enormous difference between supply and demand, which is continuously increasing, since a new birth occurs every nine months and a new architect completes training every seven years.
7. At my last count, in Trinidad and Tobago, there were 65 practicing registered architects to service a population of 1.3 million people. This means that 1 architect has a potential market of 18,000 persons. Therefore, if s/he obtains one client per year, s/he has to live for 18,000 years to satisfy this market share, bearing in mind that the population is growing in a 7:1 ratio to the supply of architects and repeat business follows a quality service.
In one city in India, there were 500 architects for a population of 4 million persons, i.e. 1 architect with a market share of 8,000 persons.
In Martinique and Guadeloupe there were 220 architects for a population of 700,000 persons, i.e. 1 architect with an available market share of 1,181 persons.
8. The majority of developments, both in the residential and commercial domains, confront with nature's guidelines for developing, which demands the following -
 - Only what is necessary to be removed be removed.
 - Include shelter agriculture and green building techniques.
 - Develop high-rise structures in the incline plane or stepped forms.
 - Embrace the natural and unplanned surrounding environment, in order to enhance the living quality of the whole community.
9. Architects, in spite of the devastating negative effects being felt by Nations, give sociological and psychosocial concerns, existing and developing in settlements slight attention. Issues like Crime, Poverty, Domestic Violence and Dysfunctional Families.

Traditional architectural practice has exhibited as outlined above three things: -

1. A serious Personnel problem.
2. A bad Attitude towards Nature and
3. Insensitivity to the sociological and psychosocial aspects of space use.

I repeat here that traditional architecture, as had been practiced to date has failed us miserably

Consequently, we need a new direction for this profession of my choice and soul. It has slipped off the path for genuine development. Many are being overwhelmed by the glory of accreditation and the love for beautiful drawings and buildings, a small part of the whole concept that is “Service To Humanity”, in this discipline that is architecture, shaping space to benefit humankind.

This direction is titled “**Natural Growth Architecture,**” architecture for the people, by the people, with the people. A lifestyle you could say, which places the spiritual before the personal. A continuous living, learning, service to humanity, shaping space to achieve maximum efficiency, minimum cost, with development in harmony with nature and the built environment, both formal and informal. A definition for this new architecture is given immediately below: -

Natural Growth Architecture is the science, art or activity directed towards solving humankind's space problems, utilizing its human, capital and/or natural resources in a manner sensitive and adaptive to evolving design, construction and sociological concerns.

The following 8 points briefly describe what is the study/practice of Natural Growth Architecture: -

1. A study of architecture alongside providing a service, which will never be completed, accepting the philosophy that growth is continuous and God is the final Judge of competence, i.e. certification will never be achieved.
2. This study/practice is fuelled by: -
 - ***Formally trained concepts.***
 - ***Experiential and self directed learning.***
 - ***Natural growth concepts.***
3. This study/practice is based on design, construction, social and nature 's guidelines utilizing: -
 - ***Formal teaching methods.***
 - ***Research in the area of architecture studied as a live-in student.***
 - ***Analysis of peripheral or supporting disciplines.***
4. It suggests that the force within (the love) to be involved with architecture and the space solution it encompasses, is too dynamic to wait on the classroom model of learning and places little emphasis on the regimentation and prestige of accreditation associated with traditional training for architects.
5. The titles in this study/practice are of two types: -
 - ***A person following the 14 Principles in Natural Growth Architecture for 1 to 8 years is a Friend of Architecture.*** (Principles are listed on next page No 4)
 - ***A person following the 14 Principles in NGA for 8 years to the end of their natural life is a Natural Growth Architect.*** (Principles are listed on next page No 4)
6. The level of commitment required to stay a Friend of Architecture and eventually a Natural Growth Architect, will soon weed out those without that special love (inward force) necessary to fine tune skills essential for providing the best “space solutions” in humankind's quest for positive development.
7. Because of the limited number of architects available to citizens worldwide, they should be made use of at every level of their training, according to the levels of expertise acquired as they progress.
8. Developing countries cannot afford the luxury of sending their best potential architects abroad to study. This means 7 years without this citizens/student input into National Development, which will allow growth for both the country and the individual. Further, the acclimatization to a foreign climate will be a setback to providing service in the home country, if and when they return.

The following 14 Principles of Natural Growth Architecture further explain the 8 points abovementioned. These Principles start with a Pledge emphasizing the most important Principle in the study and practice of Natural Growth Architecture: -

1. I pledge to place service to humankind above all other demands on architecture.
2. Love for architecture as a service (the spiritual) before love for beautifully shaped spaces and the acquisition of material wealth (the personal) thereby making a genuine and positive contribution to the development of the art and practice of architecture.
3. Development and practice links service with training in a continuous spiral to the end allowing horizontal dialogue throughout the path as opposed to vertical dialogue. *The numbers dictate.*
4. Shelter Agriculture is essential to settlement development i.e. a percentage of all residential building lots must be allocated for agricultural purposes.
5. Green Architecture principle in high-rise residential and commercial construction directing that a percentage at every floor level be utilized for plant or agricultural use.
6. High-rise development to be non-confrontational to nature. Inclined or stepped not vertical.
7. Location for service/training relevant to focus of specialization choice e.g. housing, schools.
8. Legal/activist vehicle formulated in order to provide immediate and long-term dissemination of information relevant to the specialization, further developing the service/practice, (the developmental nature of NGA) e.g. registered NGO or CBO.
9. Recognizing and vigorously promoting a Human Resource Management Policy which identifies the Full Cycle Of Human Development paying close attention to the Ripple Effect Theory (RET) and the Ripple Effect Model (REM) for research and development.
10. All efforts towards the solving of space problems will appreciate and include the usable existing natural growth experiences emanating from both planned and unplanned developments.
11. Gender issues will be given its just due e.g. parenting practices, domestic violence, etc.
12. The elements in this study/practice mandate close attention to the following factors: -

i. Socio-design.	ii. Socio-construction.	iii. Socio-legal.
iv. Socio-education.	v. Socio-transportation.	vi. Socio-management.
vii. Socio-dialogue.	viii. Socio-environment.	ix. Socio-psychological.
x. Socio-economic.		
13. Friends of Architecture and Natural Growth Architects must be prepared to receive basic and advanced training respectively in the following subject areas, whilst giving service in accordance to their level of competency: -

• Design, Construction and Theory of Structures. • Law (both civil and criminal) • Social Psychology. • Environmental Psychology. • Pedagogy.	• Computer Literacy. • Non-Governmental Activity • Home Management. • Services. • Nature of Materials
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14. Candidates for the study/practice of Natural Growth Architecture will have one or two of the following characteristics: -
 - A person with that inward force (love/desire) to solve space problems, too strong to sit out the classroom-training model.
 - A person with that inward force (love/desire) to solve space problems but without the financial capital to acquire the formal training in a classroom.
 - A person with that inward force (love/desire) to solve space problems but unhappy with the aloft image and detrimental aspects of architectural practice to date.

Signed DONALD BERMENT Secretary MAVAW.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators: David Law, Johnny Bharath.

P.O.R.O.

A Culture Of Peace

- *Twenty-First Century Projects By
M.A.V.A.W.*

Enhancing the Family



- ENHANCING THE FAMILY WORKSHOP NOV/5/2009
- YMCA HEADQUARTERS—WRIGHTSON ROAD—POS.



- Thank You For Attending In Spite of Your Busy Schedules.

GOOD MORNING & WELCOME TO ENHANCING THE FAMILY—Thur/5/Nov/09.



- St. Barb's Community Action Council Youth Mentorship Initiative
- **Host:** - Ministry of National Security, Citizen Security Programme.
- **Community Action Officer (CSP):** - Gary Grant.
- **Coordinator (CSP):** - Gregory Sloane Seale.
- **Facilitator:** - Donald Berment, Secretary/Director, Men Against Violence Against Women (MAVAW)/Housing Specialist &NGA.

• Topics For Discussion.

- 1. Introduction & Interpretation 6. Dysfunctional Family
- 2. Attitude & Self Esteem (NEW) 7. Parenting (MAVAW CD)
- 3. Values & Empathy (NEW) 8. Domestic Violence (MAVAW CD)
- 4. Emotional Intelligence & List 9. Healthy Relationships (CD)
- 5. Anger Management & Life Skills 10. Space Dynamics (MAVAW CD)
- 11. Stress Management (NEW) 12. Conduct Principles (NEW)

OBJECTIVES OF TRAINING

FROM THE FACILITATORS STANDPOINT.

- TO ADD TO YOUR LEARNING
- TO ADD TO THE ENHANCEMENT OF YOUR FAMILY
- TO ADD MORE UNDERSTANDING IN YOUR LIFE
- TO PROVIDE ADDITIONAL LIFE SKILLS
- TO INCREASE YOUR APPRECIATION OF FAMILY LIFE

FROM THE PARTICIPANT STANDPOINT.

- ..(TO BE COMPLETED BY PARTICIPANTS)
- ..
- ..
- ..
- ..

INTRODUCTION



- Folders with MAVAW CD and 6 Handouts Given to Participants.
 - Names of Participants Added at Introduction.

- 1. Akel Charles.
- 2. Kyle Clarke.
- 3. Jamal Aberdeen.
- 4. Kervin Xavier
- 5. Kobi Ward.
- 6. Trisha Baptiste.
- 7. Karen Saunders Abdulai.
- 8. Roland Mitchell.
- 9. Leon Waldron.
- 10. Gary Grant
- 12. absent
- 13. absent
- 14. absent
- 15. absent
- 16. Donald Berment.

Men Against Violence Against Women (MAVAW) 103FM (2008-2009), 91.1FM(2007), Family Status Committee (2003-2004), Reform of the DV Act 1991(1997), Company Status 1978, NGO Status 1974.

INTERPRETATION.

Enhance: - to make higher or greater, as in reputation, cost, beauty, quality etc.

Family: - • The family is a structure that is a set of relationships and a space, which creates an environment where the social, psychological, physical, spiritual and economic needs of individuals are constantly interfacing. It is an environment in which individuals relate to one another in a variety of Capacities and in which the problems of everyday life are worked out.

UN 1996. (Reference FACT SHEET No 1—SLIDE # 4)

The Executive Summary of the Report accepted by the Committee, noted that our study found the family to be the core socializing agency and impacts upon its environment, conversely the environment also impacts on the family. Some systems in the environment that significantly influence the values and way of life of families are; *the education and legal systems, religion, the media and the community, with which the families interact on a continuous basis.*

FACT SHEET ONE.

- MAVAW sat on the recently completed (2003 to 2004) *Cabinet Ad-Hoc Multi-Disciplinary Committee to “Examine the Status of the Institution of the Family in Trinidad and Tobago,”* and I am proposing that we use the definition of the family used by that Committee to proceed with the Programme, which is as follows: - (SLIDE # 3 DEFINITION)

- **The Challenges to Family Life were identified as follows: -**

- • Disadvantaged economic situation of low income families, particularly single parent families.
 - • Poor parenting skills and practices.
 - • Poor socializing skills in some instances.
 - • Insufficient and ineffective communication within some families.
 - • Poor and at times abusive methods of discipline.
 - • *The negative influence of the media/cable*
 - • Migrant and absentee parents.
 - • A drug culture and its associated criminal sub-culture.
 - • Changes in community and societal values.
- The local data revealed that the most common family form was the *unions by marriage*. The next most common family form was *the extended family* followed by *single parents, persons living alone and common-law unions*.

There was a 15% decrease in the number of marriages over the period 1980-2000 and a noticeable increase of approximately 67% in the number of divorces for the same period. The data also reflected a high incidence of domestic violence and family disputes in Trinidad and Tobago.

Flip Chart 1—Exploring Enhancing—Whole Group Work.

- WHAT ARE SOME WAYS A FAMILY CAN BE ENHANCED.
- Everybody get along better.
- Money
- Love
- Unity
- Communication
- Shelter
- Stability
- Control (used discussion by Kyle and Kervin to expand HEAD Control and SELF Control)
- Nurturing (used Karen bringing her 9 year old son Kobi as an example and the drawing by Leon during the discussion)
- Recreation (ALL CONTRIBUTIONS EXPANDED WITH EXAMPLES)
- *Drawing of a Black Stallion with Colour on Mane or Underbody.*

Flip Chart 2—Emotional Violence—Whole Group Work.

- HOW DOES A PERSON COMMIT EMOTIONAL VIOLENCE?
- (Discussion After Showing the 6 Other Handouts Given, Printed By Gary)
- By being Bad
- By being Silent
- By showing Passion with Fear
- *Drawing of a Person to explain the connection between violence to someone and the indirect violence to their loved ones in addition to the mother and father component which made that person.*
- *A lot of interaction ensued before a BREAK for Refreshments and after further discussions, Lunch.*
- *One peer counselling session done from 2.15 to 2.35.*
- There is a great need for this type of INTERVENTION and the VARIETY of TOPICS Scheduled by the Citizen Security Programme is a very good method to address MENTORING.
- A Proposed 5 Day Programme focused on “Enhancing The Family “will include Original Pain Theory in the pm, with other Topics in the am & pm and will soon be submitted for funding. Our Motto is (E-MOTION—Energy In Motion.)

ATTITUDE.

- **Attitude:** (Colliers) - state of mind, behaviour or conduct, regarding some matter, as indicating opinion or purpose.
 - position of the body, as suggesting some thought, feeling or action.
- **Attitude:** - (psychology) from Wikipedia. An **attitude** is a hypothetical construct that represents an individual's degree of like or dislike for an item. Attitudes are generally positive or negative views of a person, place, thing, or event-- this is often referred to as the attitude object. People can also be conflicted or ambivalent (uncertain) toward an object, meaning that they simultaneously possess both positive and negative attitudes toward the item in question.
- Attitudes are judgments. They develop on the **ABC** model (affect, behavior, and cognition). The affective response is an emotional response that expresses an individual's degree of preference for an entity. The behavioral intention is a verbal indication or typical behavioral tendency of an individual. The cognitive response is a cognitive evaluation of the entity that constitutes an individual's beliefs about the object. Most attitudes are the result of either direct experience or observational learning from the environment.
- Unlike personality, attitudes are expected to change as a function of experience and can be changed through persuasion with emotion being a common component in persuasion, social influence and attitude change.

SELF ESTEEM

- **Self-esteem** is a term used in [psychology](#) to reflect a [person's](#) overall evaluation or appraisal of his or her own worth.
- Self-esteem encompasses beliefs (for example, "I am [competent-incompetent](#)") and emotions (for example, [triumph-despair](#), [pride-shame](#)). Behavior may reflect self-esteem (for example, [assertiveness-shyness](#), [confidence-caution](#)).
- Psychologists usually regard self-esteem as an enduring personality characteristic (trait self-esteem), though normal, short-term variations (state self-esteem) occur.
- Self-esteem can apply specifically to a particular dimension (for example, "I believe I am a good writer, and feel proud of that in particular") or have global extent (for example, "I believe I am a good person, and feel proud of myself in general").
- Synonyms or near-synonyms of self-esteem include: self-worth, self-regard, self-respect, self-love (which can express overtones of self-promotion), and self-integrity. Self-esteem is distinct from [self-confidence](#) and [self-efficacy](#), which involve beliefs about ability and future performance.
- The socio-[psychological](#) concept of **self-confidence** relates to self-assuredness in one's personal judgment, ability, [power](#), etc., sometimes manifested excessively
- **Self-efficacy** is the belief that one is capable of performing in a certain manner to attain certain goals. It is a belief that one has the capabilities to execute the courses of actions required to manage prospective situations. Unlike [efficacy](#), which is the power to produce an effect (in essence, [competence](#)), self-efficacy is the belief (whether or not accurate) that one has the power to produce that effect. For example, a person with high self-efficacy may engage in a more health-related activity when an illness occurs, whereas a person with low self-efficacy would harbor feelings of hopelessness.

VALUES.

- **Values:** - something regarded as desirable, worthy or right, as a belief, standard or precept (rule of personal conduct).
- **A code of ethics** is a set of statements about appropriate and expected behaviour of members of a professional group, family, school etc. and as such, reflects its values. We inherit our values from our Family, Environment and Culture and we adopt new ones as we grow up and mature.
- The following values and processes are considered central to the **Family Code of Ethics:**
 - Respect and Forgiveness
 - Spirituality and Honour
 - Understanding and Empathy
 - Freedom and Respect for Rights
 - Honesty and Integrity.
 - Social and Cultural responsiveness.
 - Kindness and Compassion.
 - Acceptance of Differences.
 - Courage and Humility.
 - Justice and Equality With Equity
 - Cooperation and Perseverance
 - Morality and Appreciation
- A **value system** is a set of consistent **values** and measures. A **principle value** is a foundation upon which other values and measures of **integrity** are based. Values are considered **subjective**, vary across people and cultures and are in many ways aligned with **belief** and belief systems. Types of values include **ethical/moral** values, **doctrinal/ideological** (religious, political) values, **social** values, and **aesthetic** values.
- **Empathy** is the capability to share and understand another's **emotions** and feelings. It is often characterized as the ability to "put oneself into another's shoes," Empathy does not necessarily imply **compassion**, **sympathy**, or **empathic concern** because this capacity can be present in context of compassionate or cruel behavior.

VALUES (continued)

- **Personal values**
- *Personal values developed very early in life may be resistant to change. They may be derived from those of particular groups or systems, such as culture, religion, and political party. However, personal values are not universal; one's family, nation, generation and historical environment help determine one's personal values. "We carry with us values that influence our thoughts, feelings, and actions." This is not to say that the value concepts themselves are not universal, merely that each individual possess a unique conception of them i.e. a personal knowledge of the appropriate values for their own genes, feelings and experience. "Researches on values has found that adolescents who are involved in groups that connect them to others in school, their communities, or religious institutions report higher levels of social trust, altruism (unselfish concern for others), commitments to the common good of people, and endorsements of the rights of immigrants for full inclusion in society. Adolescents who were uninvolved in such groups were more likely to endorse self-interest and materialistic values.*
- **Cultural values**

VALUES (continued)

- *Groups, societies, or cultures have values that are largely shared by their members. The values identify those objects, conditions or characteristics that members of the society consider important; that is, valuable. In the United States, for example, values might include material comfort, wealth, competition, individualism or religiosity and sex, drugs and rock and roll. The values of a society can often be identified by noting which people receive honor or respect. In the US, for example, professional athletes are honored (in the form of monetary payment) more than college professors, in part because the society respects personal values such as physical activity, fitness, and competitiveness more than mental activity and education. This may also be the case because the society takes its education for granted and repays its teachers with non-tangible honors of relatively equal value with that of the athlete. Surveys show that voters in the United States would be reluctant to elect an atheist as a president, suggesting that belief in God is a value. There is a difference between values clarification and cognitive moral education. Values clarification is, "helping people clarify what their lives are for and what is worth working for. Students are encouraged to define their own values and understand others' values." Cognitive moral education is based on the belief that students should learn to value things like democracy and justice as their moral reasoning develops."*
- *Values are related to the [norms](#) of a culture, but they are more general and abstract than norms. Norms are rules for behavior in specific situations, while values identify what should be judged as good or evil. Flying the national flag on a holiday is a norm, but it reflects the value of patriotism. Wearing dark clothing and appearing solemn are normative behaviors at a funeral. They reflect the values of respect and support of friends and family. Different cultures reflect different values. "Over the last three decades, traditional-age college students have shown an increased interest in personal well-being and a decreased interest in the welfare of others." Values seemed to have changed, affecting the beliefs, and attitudes of college students.*
- *Members take part in a [culture](#) even if each member's personal values do not entirely agree with some of the [normative](#) values sanctioned in the culture. This reflects an individual's ability to synthesize and extract aspects valuable to them from the multiple subcultures they belong to.*
- *If a group member expresses a value that is in serious conflict with the group's [norms](#), the group's authority may carry out various ways of encouraging conformity or stigmatizing the non-conforming behavior of its members. For example, imprisonment can result from conflict with social norms that have been established as law.*

EMOTIONAL INTELLIGENCE

There is no single view of what EI is; there are a number of different views (as with many management topics). Daniel Goleman, one well-known author, defines EI as:

The capacity for recognising our own feelings and those of others, for motivating ourselves, and for managing emotions well in ourselves and in our relationships.

When people are handled badly businesses lose money through wasting time. Equally, effectiveness can be improved by mastering relationship skills with customers, suppliers and staff. Leadership requires excellent EI competencies, which can have a startling effect on personal and business success. This might seem a tall order, but it can be achieved through increased EI.

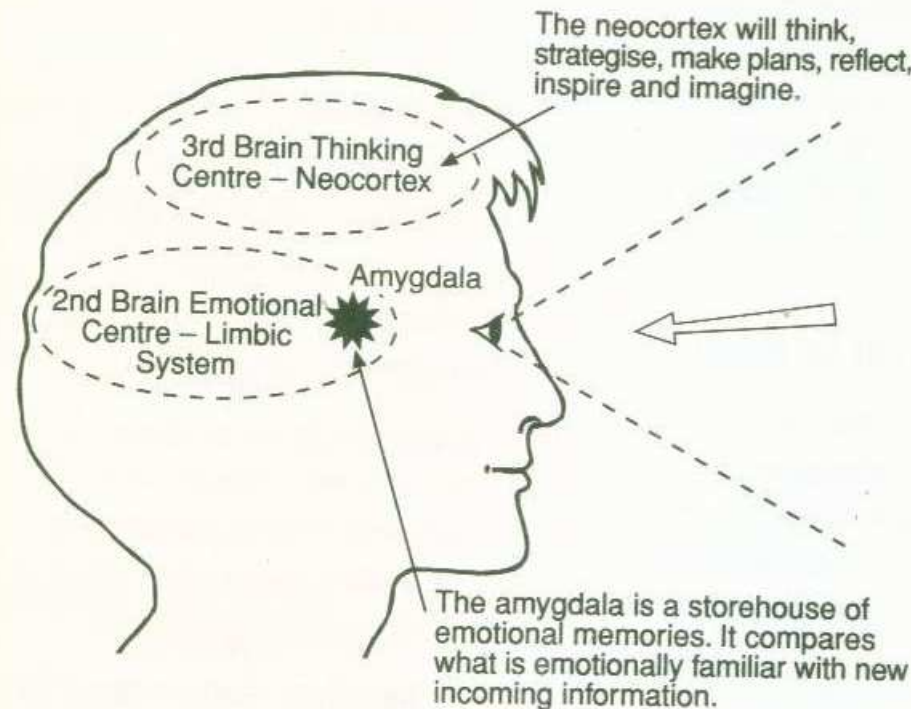
Whereas IQ is more or less a given, EQ can be learned. The distinction is about your way of *being* not of *doing*.

Improvement cannot be achieved solely by attending a training course or reading a book to acquire knowledge.

EMOTIONAL INTELLIGENCE (Continued)

Intellect (cognition or thinking) is based on the workings of the Cerebral Cortex (3rd Brain), the more recently evolved

layers at the top of the brain. Emotions are controlled by the more ancient Subcortex (2nd Brain), a lower part of the brain.



EMOTIONAL INTELLIGENCE (continued)

Experts are beginning to agree that types of intelligence other than IQ (Intelligence Quotient) have evolved in humans over the last two million years. A high IQ is not enough to guarantee success in life. When you have a high EQ (Emotional Intelligence Quotient) you are adept at interpreting the emotional roots of your own thinking and behaviours and *choosing* your actions to influence outcomes. You are also capable of making good insights into the behaviours and reactions of others.

EMOTIONAL INTELLIGENCE (continued)

Two types of learning

If you are really in tune with your needs, you will find it easier to tackle the kind of learning involved in raising your EQ. We have postulated that there are two basic types of learning:

- **Cognitive.** Cognitive learning is about absorbing new data and gaining of insights into existing frameworks of association. We also need to engage that part of the brain where our emotional signature is stored. Changing habits, such as learning to approach people positively rather than avoiding them or to give them feedback skillfully, is much more challenging than simply adding new data to old.
- **Emotional.** Emotional learning involves this and more. Emotional learning involves new ways of thinking and acting that are more in tune with our identity – our values and beliefs and attitudes. If you are told to learn a new word processing program, you will probably get on with it; however, if you are told that you need to improve control of your temper, you are likely to be upset or offended. The prospect of needing to develop greater emotional intelligence is likely to generate resistance to change.

LIFE SKILLS

- Life Skills are abilities that will help us act on our Values and Principles.
- We need Life Skills to stay happy and healthy during adolescence and adult life in order to: -
 - Talk about our Feelings with non-aggressive ‘I’ Statements
 - Communicate what we feel without creating conflict
 - Know what we think and stand by, no matter what other people say
 - Learn to make good decisions under pressure.
- Some Examples are: -
 - Assertiveness - (added by Participants)
 - Creative Thinking -
 - Problem Solving -
 - Decision Making -
 - Coping -
 - Self Awareness -
 - Self Efficacy -

(The above taken from Page 8 of “You Your Life Your Dreams—A Book for Caribbean Adolescents”)

LIST OF EMOTIONS

The artificial language Lojban has interjections expressing degrees of emotions. These include:

- **Simple emotions**

- discovery - confusion
- gain - loss
- generosity - greed
- surprise - no surprise - expectation
- wonder - commonplace
- happiness - unhappiness
- amusement - weariness
- completion - incompleteness
- caring - loving
- courage - timidity - cowardice
- pity - cruelty
- repentance - lack of regret - innocence

- **Complex emotions**

- pride - modesty - shame
- closeness - detachment - distance
- complaint/pain - doing OK - pleasure
- caution - boldness - rashness - drama
- patience - mere tolerance - anger
- relaxation - composure - stress

- **Pure emotions**

- fear - nervousness - security
- togetherness - privacy
- respect - disrespect
- appreciation - envy
- love - indifference - hatred
- familiarity - mystery

- **Propositional attitudes**

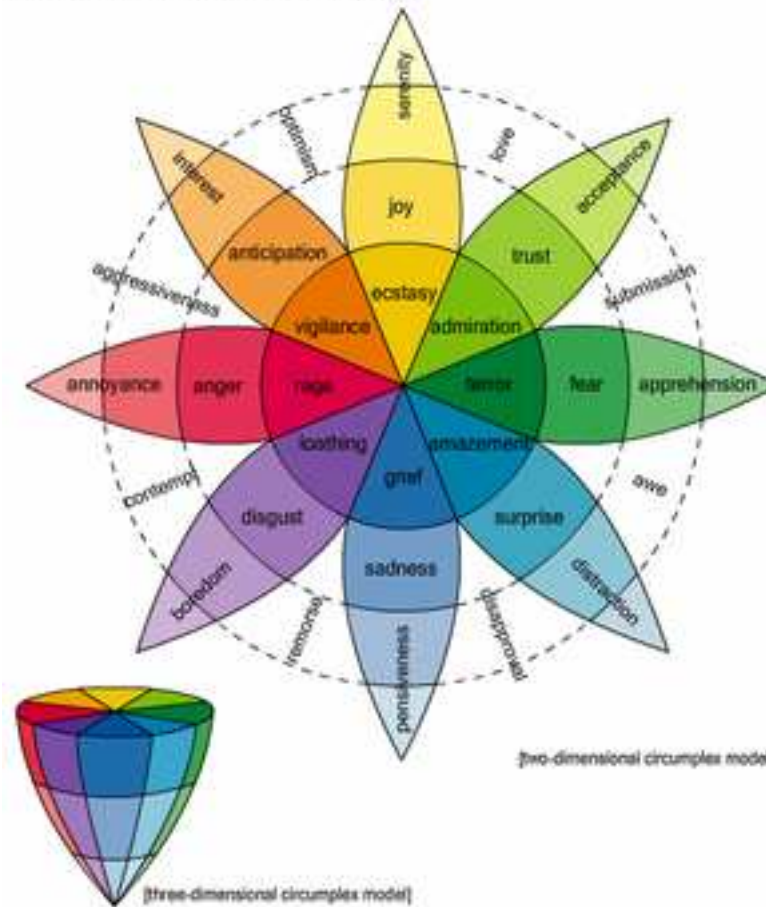
- attentive - inattentive - avoiding
- alertness - exhaustion
- intent - indecision - refusal
- effort - no real effort - repose
- hope - despair
- desire - indifference - reluctance
- interest - no interest - repulsion

- **Complex propositional attitudes**

- permission - prohibition
- competence - incompetence
- obligation - freedom
- constraint - independence - resistance to constraint
- request - negative request
- suggestion - no suggestion - warning
- understand - confused
- **Lojban** (pronounced [lɔʒban]) is a constructed, syntactically unambiguous human language based on predicate logic. Its predecessor is Loglan, the original logical language by James Cooke Brown.
- The principal sources of its basic vocabulary were the six (at the time) most widely spoken languages: Mandarin, English, Hindi, Spanish, Russian, and Arabic, chosen to reduce the unfamiliarity or strangeness of the root words to people of diverse linguistic backgrounds. The language has drawn on other constructed languages' components, a notable instance of which is Láadan's set of indicators
- Proposition (Logic) a statement that affirms or denies something and is either true or false.

EMOTIONS WHEEL.

Plutchik's Wheel of Emotions



ANGER MANAGEMENT.

- The term **Anger management** commonly refers to a system of psychological therapeutic techniques and exercises by which someone with excessive or uncontrollable anger can control or reduce the triggers, degrees, and effects of an angered emotional state.
- One technique for controlling anger is finding agreement with another person rather than a conflict. In some countries, courses in anger management may be mandated by their legal system.
- The use of deep breathing and meditation can be used as a means of relaxation. Other interventions include learning empathy, stress management skills, forgiveness, changing how you speak about yourself or others and improving optimism. As the issue of anger varies from person to person, the treatments are designed to be personal to the individual.

ANGER MANAGEMENT (continued).

- *In modern society, anger is viewed as an immature or uncivilized response to frustration, threat, violation, or loss. Conversely, keeping calm, coolheaded, or turning the other cheek is considered more socially acceptable. This conditioning can cause inappropriate expressions of anger such as uncontrolled violent outbursts, misdirected anger or repressing all feelings of anger when it would be an appropriate response to the situation. Also, anger that is constantly “bottled up” can lead to persistent violent thoughts or actions[, nightmares and even physical symptoms. Anger can also aggravate an already present [mental health](#) problem such as [clinical depression](#).*
- *Many people believe that depression is in fact anger turned inwards. This is because many depressed people react to [stress](#) by turning their anger inward as a response to physical or mental abuse or neglect from parents or others. One secondary effect of the depression sufferer's denial of anger is that their [interpersonal relationships](#) are often unhappy and unhealthy.*
- *Another side-effect of anger is that it can fuel obsessions, [phobias](#), [addictions](#) and [manic](#) tendencies. Many people who are not able to express their anger will let it out in some sort of furious activity which can result in clinical depression or even [bipolar disorder](#). Anger can also fan the flames of [paranoia](#) and [prejudice](#), even in normal, everyday situations. People tend to express their anger either passively or aggressively through the [fight-or-flight response](#). The passive “flight” response is repression and denial of anger for safety. However, [aggressive](#) behavior is associated with the “fight” response and the use of the verbal and physical power of anger to abuse and hurt others.*

ANGER MANAGEMENT (continued).

- *Anger can be of one of two main types: **Passive anger** and **Aggressive anger**. These two types of anger have some characteristic symptoms:*
- **Passive anger**
- *Passive anger can be expressed in the following ways:*
- **Secretive behavior**, such as stockpiling resentments that are expressed behind people's backs, giving the [silent treatment](#) or under the breath mutterings, avoiding eye contact, putting people down, gossiping, anonymous complaints, poison pen letters, stealing, and conning.
- **Manipulation**, such as provoking people to aggression and then patronizing them, provoking aggression but staying on the sidelines, emotional blackmail, false tearfulness, feigning illness, sabotaging relationships, using sexual provocation, using a third party to convey negative feelings, withholding money or resources.
- **Self-blame**, such as apologizing too often, being overly critical, inviting criticism.
- **Self-sacrifice**, such as being overly helpful, making do with second best, quietly making long suffering signs but refusing help, or lapping up gratefulness.
- **Ineffectualness**, such as setting yourself and others up for failure, choosing unreliable people to depend on, being accident prone, underachieving, sexual impotence, expressing frustration at insignificant things but ignoring serious ones.
- **Dispassion**, such as giving the cold shoulder or phony smiles, looking unconcerned, sitting on the fence while others sort things out, dampening feelings with substance abuse, overeating, oversleeping, not responding to another's anger, frigidity, indulging in sexual practices that depress spontaneity and make objects of participants, giving inordinate amounts of time to machines, objects or intellectual pursuits, talking of frustrations but showing no feeling.
- **Obsessive behavior**, such as needing to be clean and tidy, making a habit of constantly checking things, over-dieting or overeating, demanding that all jobs be done perfectly.
- **Evasiveness**, such as turning your back in a crisis, avoiding conflict, not arguing back, becoming phobic.

ANGER MANAGEMENT (continued).

- *The symptoms of aggressive anger are:*
- **Threats**, such as frightening people by saying how you could harm them, their property or their prospects, finger pointing, fist shaking, wearing clothes or symbols associated with violent behaviour, [tailgating](#), excessively blowing a car horn, slamming doors.
- **Hurtfulness**, such as physical violence, verbal abuse, biased or vulgar jokes, breaking a confidence, using [foul language](#), ignoring people's feelings, willfully discriminating, blaming, punishing people for unwarranted deeds, labeling others.
- **Destructiveness**, such as destroying objects, harming animals, destroying a relationship between two people, reckless driving, substance abuse.
- **Bullying**, such as threatening people directly, persecuting, pushing or shoving, using power to oppress, shouting, using a car to force someone off the road, playing on people's weaknesses.
- **Unjust blaming**, such as accusing other people for your own mistakes, blaming people for your own feelings, making general accusations.
- **Manic behavior**, such as speaking too fast, walking too fast, working too much and expecting others to fit in, driving too fast, reckless spending.
- **Grandiosity**, such as showing off, expressing mistrust, not delegating, being a sore loser, wanting center stage all the time, not listening, talking over people's heads, expecting kiss and make-up sessions to solve problems.
- **Selfishness**, such as ignoring other's needs, not responding to requests for help, queue jumping.
- **Vengeance**, such as being over-punitive, refusing to forgive and forget, bringing up hurtful memories from the past.
- **Unpredictability**, such as explosive rages over minor frustrations, attacking indiscriminately, dispensing unjust punishment, inflicting harm on others for the sake of it, using alcohol and drugs, illogical arguments.
- *It should be stated that anyone displaying any of these behaviours does not always have an anger management problem.*

ANGER MANAGEMENT (continued)

- *Psychologists recommend a balanced approach to anger, which both controls the emotion and allows the emotion to express itself in a healthy way. Some descriptions of actions of anger management are:*
- **Direct**, such as not beating around the bush, making behaviour visible and conspicuous, using [body language](#) to indicate feelings clearly and honestly, anger directed at persons concerned.
- **Honorable**, such as making it apparent that there is some clear moral basis for the anger, being prepared to argue your case, never using manipulation or emotional blackmail, never abusing another person's basic human rights, never unfairly hurting the weak or defenseless, taking responsibility for actions.
- **Focused**, such as sticking to the issue of concern, not bringing up irrelevant material.
- **Persistent**, such as repeating the expression of feeling in the argument over and over again, standing your ground, self defense.
- **Courageous**, such as taking calculated risks, enduring short term discomfort for long term gain, risking displeasure of some people some of the time, taking the lead, not showing fear of other's anger, standing outside the crowd and owning up to differences, using self-protective skills.
- **Passionate**, such as using full power of the body to show intensity of feeling, being excited and motivated, acting dynamically and energetically, initiating change, showing fervent caring, being fiercely protective, enthusing others.
- **Creative**, such as thinking quickly, using more wit, spontaneously coming up with new ideas and new views on subject
- **Forgive**, such as demonstrating a willingness to hear other people's anger and grievances, showing an ability to wipe the slate clean once anger has been expressed.
- **Listen** to what is being said to you. Anger creates a hostility filter, and often all you can hear is negatively toned.
- *A common skill used in most anger management programs is learning assertive communication techniques. Assertive communication is the appropriate use of expressing feelings and needs without offending or taking away the rights of others. It is typically started with the use of "I" statements followed by a need statement. For example, "I feel upset when you don't take my feelings into consideration when you talk about your past relationships. I hope you can be more thoughtful and know what you should and should not say the next time."*
- *With regard to interpersonal anger, Dr. Eva L. Feindler recommends that people try, in the heat of an angry moment, to see if they can understand where the alleged perpetrator is coming from. Empathy is very difficult when one is angry but it can make all the difference in the world. Taking the other person's point of view can be excruciating when in the throes of anger, but with practice it can become second nature. Of course, once the angry person is in conditions of considering the opposite position, then the anger based on righteous indignation tends to disappear.*

DYSFUNCTIONAL FAMILY.

- A **dysfunctional family** is a [family](#) in which [conflict](#), misbehavior and even [abuse](#) on the part of individual members of the family occur continually and regularly, leading other members to accommodate such actions. Children sometimes grow up in such families with the understanding that such an arrangement is normal. Dysfunctional families are primarily a result of [co-dependent](#) adults, and also affected by the [alcoholism](#), substance abuse, or other [addictions](#) of parents, parents' untreated [mental illnesses/defects](#) or [personality disorders](#), or the parents emulating their own dysfunctional parents and dysfunctional family experiences.
- Dysfunctional family members have common symptoms and behavior patterns as a result of their common experiences within the family structure. This tends to reinforce the dysfunctional behavior, either through enabling or perpetuation. The family unit can be affected by a variety of factors.
- **Examples of a dysfunctional family**
- Denial (i.e. a refusal to acknowledge the alcoholism of a parent or child/teenager; ignoring complaints of [sexual abuse](#); having a [workaholic](#) parent), also known as the "[elephant in the room](#)."
- Lack of [empathy](#) and understanding toward family members
- Lack of clear [boundaries](#) (i.e. throwing away personal possessions that belong to others, inappropriate physical boundaries, breaking important promises without just cause)
- Lack of equality and fairness toward younger family members (may include frequent [appeasement](#) at the expense of others or uneven enforcement of rules)
- Mixed Messages by having a dual system of [values](#) (i.e. one set for the outside world, another when in private, or teaching radically different values to each child.)
- [Divorced](#) or [separated](#) parents in continuous conflict, or parents who *should* separate, but do not (to the detriment of their children)
- Adulterous or promiscuous behavior regarding parents/teenagers
- Extremes in [conflict](#) (either too much or too little fighting between family members)

DYSFUNCTIONAL FAMILY (continued).

- Signs of unhealthy parenting:
- [Disrespect](#)
- [Emotional intolerance](#) (family members not allowed to express the "wrong" emotions)
- Ridicule
- Bitterness
- "I don't care"
- Either no or excessive [criticism](#)
- [Discipline](#) based more on one's emotions than established rules (i.e. punishment by "surprise")
- Setting a bedtime that is either excessively early or late for the child's age and [sleeping](#) requirements
- Dysfunctional parenting styles:
- Using (destructively [narcissistic parents](#))
- Abusing (parents who use physical, emotional, or sexual [violence](#) to dominate their children)
- [Perfectionist](#) (fixating on order, prestige, power, and/or perfect appearances.)
- Appeasement (parents who reward bad behavior - even by their own standards, and inevitably punish another child's good behavior to maintain the peace)
- "Along for the ride" (a parent who does not care about their non-biological child, but must co-exist in the same home for the sake of their spouse or partner)
- "The guard dog" (a parent who blindly attacks any other family member who causes the slightest upset to their esteemed spouse, partner, or child)
- Dynamics of dysfunctional families:
- Parents who frequently fight amongst themselves (even if divorced or separated)
- Parents vs. kids
- The [balkanized](#) family (named after the three-way war in the [Balkans](#))
- Free-for-all (a family that fights in a free-for-all style)

DYSFUNCTIONAL FAMILY (continued).

- **Effects on children**
- Unlike divorce, and to a lesser extent, separation, there is often no record of an "intact" family being dysfunctional. As a result, friends, relatives, and teachers of such children may be completely unaware of the situation. In addition, a child may be blamed for the family's dysfunction (even if not at fault), and placed under greater stress than children whose parents separate.
- Children growing up in a dysfunctional family have been known to adopt one or more of six basic roles:
- "The Good Child" – a child who assumes the parental role.
- "The Problem Child" – the child who is blamed for most problems and can also be responsible for the family's dysfunction, in spite of often being the only emotionally stable one in the family.
- "The Caretaker" – the one who takes responsibility for the emotional well-being of the family.
- "The Lost Child" – the inconspicuous, quiet one, whose needs are often ignored or hidden.
- "The Mascot" – uses [comedy](#) to divert attention away from the increasingly dysfunctional family system.
- "The Mastermind" – the opportunist who capitalizes on the other family members' faults in order to get whatever he or she wants.
- They may also:
- think only of themselves to make up the difference of their childhoods. They're still learning the balance of self-love
- distrust others
- have difficulty expressing emotions
- have low [self-esteem](#) or have a poor [self image](#)
- have difficulty forming healthy [relationships](#) with others
- feel [angry](#), [anxious](#), [depressed](#), isolated from others, or unlovable
- perpetuate dysfunctional behaviors in their other relationships (especially their children)
- lack the ability to be playful, or childlike, and may "grow up too fast"; conversely they may grow up too slowly, or even be in a mixed mode (i.e. well disciplined, but unable to care for themselves)
- often learn to live far away from their families.

PARENTING

- The term **role model** first appeared in [Robert K. Merton](#)'s socialization research of medical students. Merton hypothesized that individuals compare themselves with [reference groups](#) of people who occupy the social role to which the individual aspires. The term has passed into general use to mean any "person who serves as an example, whose behaviour is emulated by others".

DOMESTIC VIOLENCE

HEALTHY RELATIONSHIPS

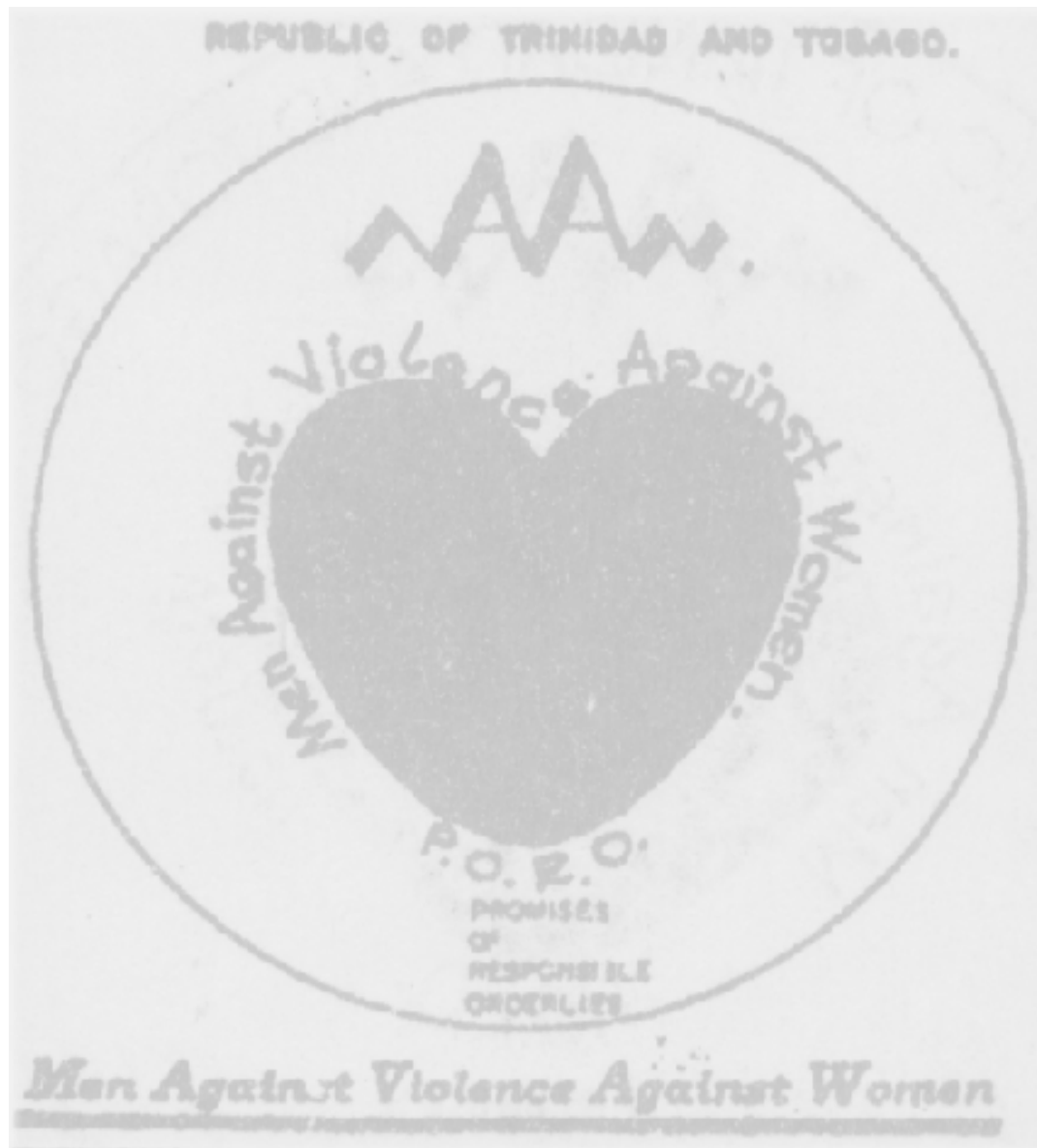
SPACE DYNAMICS

REFERENCES.

- Emotional Intelligence in a Week—Jill Dann
 - Emotional Intelligence
 - Stress Management and EI
- Complete Conduct Principles for the 21st Century, John Newton, PhD
 - 121 Principles for peaceful co-existence
- Wikipedia, the free Encyclopedia www.wikipedia.org
 - Attitude (psychology) & Self Esteem
 - Value (personal and Cultural)
 - Anger Management
 - Dysfunctional Family
 - Empathy
- Men Against Violence Against Women (MAVAW) 2007 CD
 - Domestic Violence Awareness
 - Parenting
 - Healthy Relationships
 - Space Dynamics
 - 5 MP3 2-hour Talk Radio programmes

THE END.

- Thank You for your time and patience and may your families be further enhanced henceforth.
- *The Monitoring/Evaluation of your New Knowledge will be done in a 1 Month Journal now being distributed, to be Completed by you and submitted in 1 Month's Time for acknowledgement purposes only and final stipend. Full Confidentiality will be observed.*
- God Bless.



ENHANCING THE FAMILY 5-DAY TRAINING PROGRAMME.
MAVAV'S 21ST CENTURY PROJECT.
A CULTURE OF PEACE.

The "Enhancing The Family" 5-Day Programme, which is 75% complete, awaiting input from the other facilitators, has the potential for Caribbean and International Delivery and Implementation. At Present a Budget of approximately US 13,000 can provide for 5 Facilitators, 2 Assistants, and 20 young male Participants, inclusive of Fees, Meals, Project Materials, Venue, Launch and Graduation and Participants Stipend.

If the Facilitators are required from another country, travel and accommodation costs will be added and this may carry the budget sum to between US 25,000 and US 30,000. That is to say Check In on Saturday pm and Check Out on Sunday am. The Launch will be on the Sunday afternoon, after Check In and the Graduation on Saturday Morning after the 5 days and before Checkout at 12noon.

Training days are Monday to Friday, 7.30am to 4.30pm. A coffee/juice Registration/Start of day, Lunch and a Coffee/juice afternoon Break (catering to the young "Energy In Motion" aka E-motion). Critical to the training is the component of 'Original Pain Theory/Therapy' otherwise known as "Primal Theory/Therapy". The males to receive the Training in any country will have an opportunity to understand "Original Pain" and its affects and could be the most powerfully proponents of a "Man's Movement" in Belize, focused on reducing Violence in Relationships.

If your interest is fanned, we can start thinking about the Easter Holidays 2010 for Implementation and Belize can be the first country to start building its male counterparts to the feminist movement and partners in development trained in-house. Homework is on the CD, with our Domestic Violence Awareness Handbook, Parenting, Healthy Relationships and Space Dynamics PDF Files (desktop published material).

At Present I have some preliminary figures for some of the items and I am in discussion with our Consultant Dr. Lennox Grant, email address above, one of the only 3 DSW (Doctorate in Social Work) in the Caribbean and author of 10 Books, seeking advice on the costing suggested below:-

1. 5 Facilitators	US 1,333.33 (TT\$ 8,000)
2. 2 Assistant	US 833.33 (TT\$ 5,000)
3. Venue (include Launch and Graduation)	US 1,666.67 (TT\$10,000)
4. Course Material	US 3,333.33 (TT\$ 20,000)
5. Refreshments & Lunch	US 3,333.33 (TT\$ 20,000)
6. Stipend (20 at end of 5 days) (TT\$ 500.00 per Participant)	US 1,666.67 (TT\$ 10,000)
7. Monitoring for 3 months after (Journal completed & Reviewed)	US 833.33 (TT\$ 5,000)
A TOTAL of US 12,999.96 (TT\$ 78,000)	

This sum can be applied for but Travel and Accommodation needs of 5 Facilitators for 7 days could add another US 25,000 to US 50,000. (TT\$ 150,000 to TT\$ 300,000).

Dr Grant will contact you if necessary.

Our murders and suicides of our young males is also attached along with a photograph of two of the Participants I recently interfaced with using my computer during the break.

Our website <http://www.sites.google.com/site/mavawt> or <http://www.mavaw.com> has great free information and I can post the CD for you if you want. This CD is part of the Course Materials.

http://www.youtube.com/watch?v=gy6Mh_W9r8I (IMD at the Urinal) <http://www.internationalmen...>
<http://www.youtube.com/watch?v=mBlhkjz30EI> <http://antimisandry.com/> <http://www.mavaw.com>
http://www.youtube.com/watch?v=sqmiZv1bS_s <http://www.glennsacks.com/>
http://www.youtube.com/watch?v=7gOG_DoTL7k <http://www.mensnewsdaily.com/> <http...>
<http://www.youtube.com/watch?v=aK1uA8ySxTk> http://www.youtube.com/watch?v=R7jkfix_fRM
<http://www.youtube.com/watch?v=gUvrSXg9rNs> <http://www.youtube.com/watch?v=GReaUdEA5Kw>
<http://www.youtube.com/watch?v=Tc8G3EZGoS8> http://en.wikipedia.org/wiki/Men%27s_Health_Week
<http://vimeo.com/7431442> Dr. Teelucksingh Video. <http://www.sites.google.com/site/mavawt>
<http://www.facebook.com/album.php?aid=47213&id=1258705566&l=1ec49153b6> (IMD Photographs 19 Nov 2009 at Imperial Gardens)

OTHER IMPORTANT LINKS.

http://www.facebook.com/n/?note.php&note_id=169315587855&mid=15bd7bcG4b06529eG104018bGa
<http://www.internationalmensday.com/> <http://www.xyonline.net/articles>
http://en.wikipedia.org/wiki/International_Men%27s_Day <http://www.cwgl.rutgers.edu/16days/home.html>
http://www.who.int/violence_injury_prevention/violence/4th_milestones_meeting/en/index.html
<http://whqlibdoc.who.int/publications/2004/9241592079.pdf> <http://www.un.org/en/women/endviolence/>
http://www.who.int/violence_injury_prevention/en/ <http://www.xyonline.net/links>
<http://content.yudu.com/Library/A1hwpr/HerizonsArticle/resources/index.htm?refer\rerUrl=http://www.yudu.com/item/details/97591/Herizons-Article> <http://www.iadb.org/news/detail.cfm?lang=en&id=5774> (For a IADB Grant)
<http://www.internationalmensday.com/international/malta> (First IMD Celebration in 1994 Malta. Logo)
<http://www.freewebs.com/mensrightsmalta/> (Malta Action) <http://www.newsday.co.tt/features/0,111202.html> (19 11. 09)
<http://guardian.co.tt/news/crime/2009/11/18/low-self-esteem-pushing-men-crime-consultant> (17 Nov. 09)
http://www.dadsontheair.net/storage/shows/Dads_on_the_Air_2009-11-17.mp3 (Jerome on Australian Radio)
<http://www.oneinthree.com.au/> (About Males being assaulted) <http://www.menweb.org> By Bert H. Hoff
http://www.facebook.com//2d8a2;smallarmssurvey.org/files/sas/publications/w_papers_pdf/WP/WP8-Gangs-Guns-Governance-Trinidad-Tobago.pdf (Study of Crime in Trinidad and Tobago)

- | | | |
|--|--|---|
| 1. http://www.arthurjanov.com/ | 2. http://www.primaltherapy.com/training-program-primal-center.php | PRIMAL (ORIGINAL PAIN) THEORY &
THERAPY DATA, TRAINING ONLINE &
FOUNDER DETAILS.(ARTHUR JANOV) |
| 3. http://www.primaltherapy.com/what-is-primal-therapy.php | | |
| 4. http://www.primaltherapy.com/videos-primal-therapy.php | | |
| 5. http://www.primaltherapy.com/OnlineCourses/index.php | | |
| | | |

CHOGM 2009 PHOTOGRAPHS LINKS.

<http://www.facebook.com/album.php?aid=43501&id=1258705566&l=83296df2b1> **CHOGM People's Space Link**
<http://www.facebook.com/album.php?aid=43507&id=1258705566&l=1002c8f301> **CHOGM 103 FM Radio Interview Link**
<http://www.facebook.com/album.php?aid=43508&id=1258705566&l=0bde442e0c> **CHOGM Gender Forum Link**
<http://www.facebook.com/album.php?aid=43519&id=1258705566&l=60d371f19d> **CHOGM Youth Forum Link**
<http://www.facebook.com/album.php?aid=4487&id=1258705566&l=8a70a4cd99> **My Personal Album**
<http://groups.yahoo.com/group/menagainstviolence/files/MAVAW%20Documents/> **MAVAW Documents on Yahoo List**

Design No.

Donald D. Berment

Architectural and Related Services

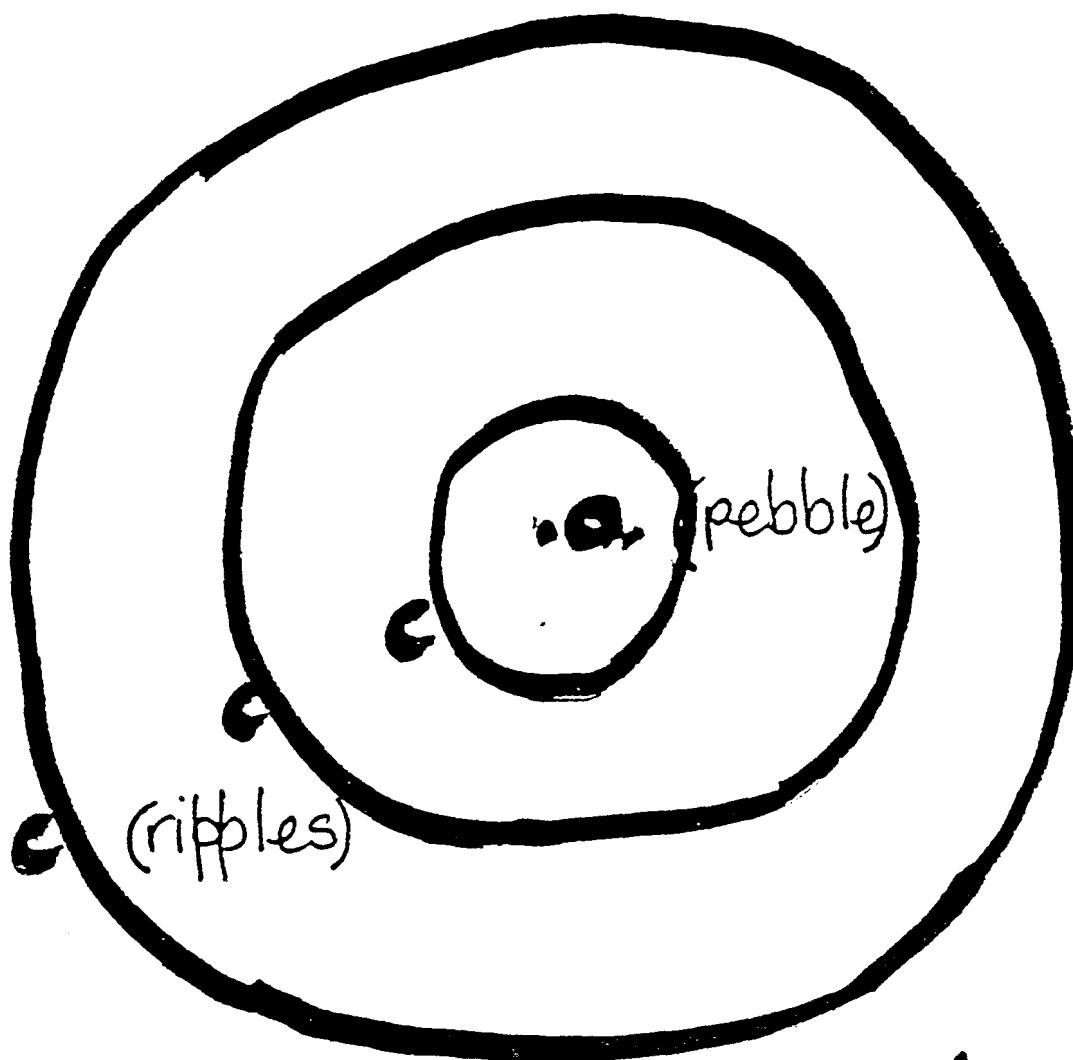
Sheet No.

2/7

45 RIVER ESTATE CIRCULAR - DIEGO MARTIN
REPUBLIC OF TRINIDAD & TOBAGO

The Ripple Effect Theory (R.E.T.)

D.
(person)
(thrower)



Example B. (Pond)

Signed

DDB 21/3/94

Housing Specialist / Space Planner

Phone

637-0924

EDUCATION

WITH

SERVICE

Design No.
CRIME
R.E.T.



Donald D. Berment

Architectural and Related Services

Sheet No.

3/7



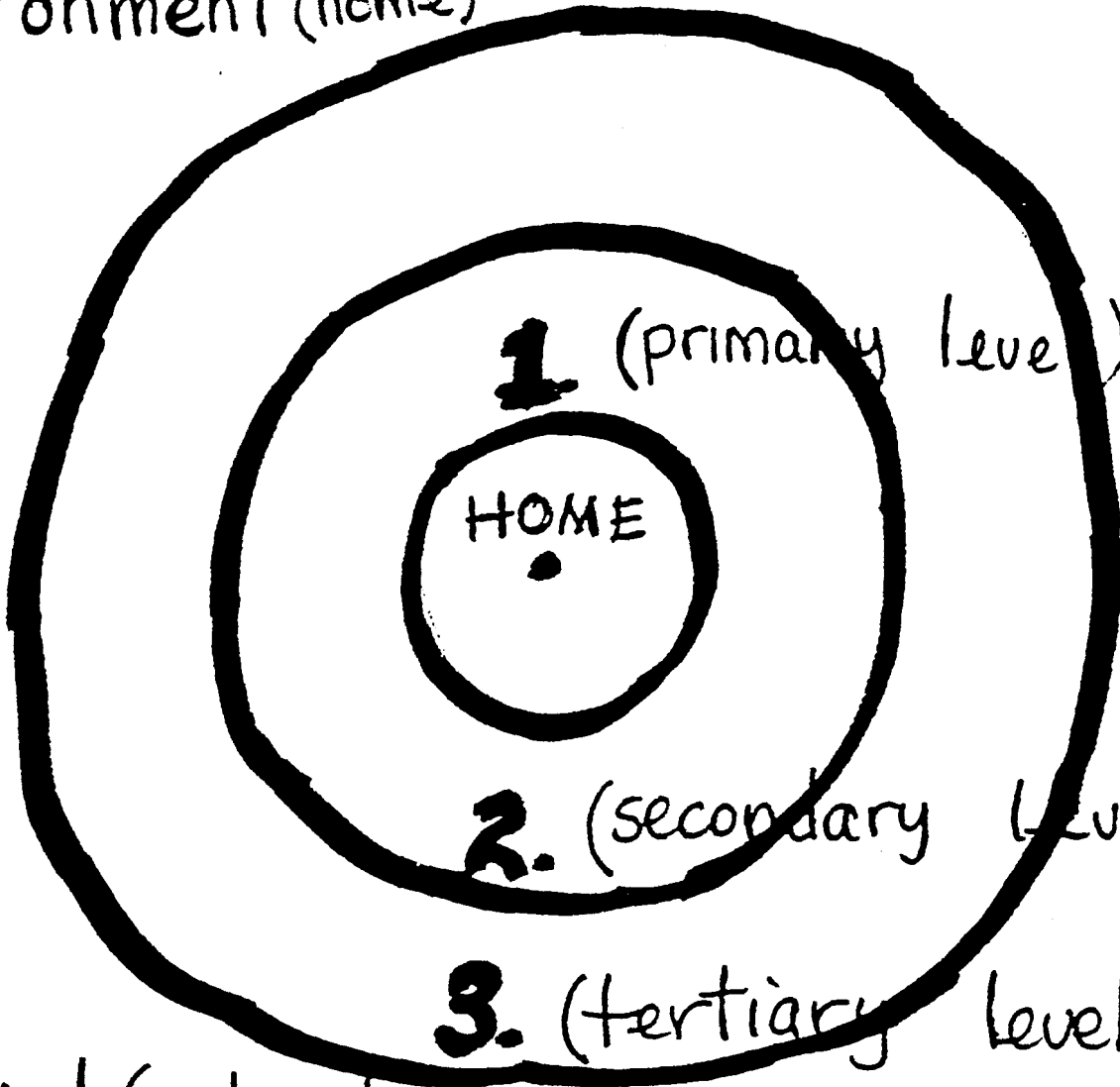
45 RIVER ESTATE CIRCULAR - DIEGO MARTIN
 REPUBLIC OF TRINIDAD & TOBAGO

1. parents
 children
 environment (home)

(R.E.T.)

2. immediate
 community

play areas / schools / shops /
 religious places.



government / big business /
 entertainment

3. national (extended)
 community

Pond Of Life

Signed

DDB 21/3/94

Phone

637-0924

Housing Specialist / Space Planner

EDUCATION

WITH

SERVICE

DESIGN

DEVELOP

DELIVER

Design No.
CRIME
R.E.T.



Donald D. Berment
Architectural and Related Services

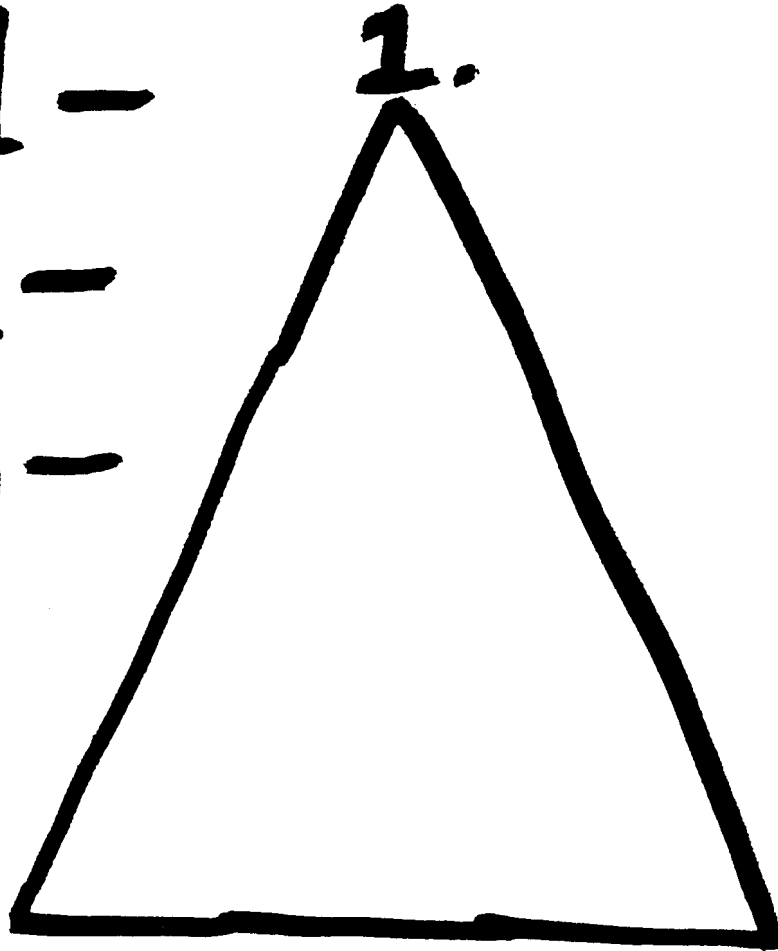


Sheet No.
5/7

45 RIVER ESTATE CIRCULAR - DIEGO MARTIN
REPUBLIC OF TRINIDAD & TOBAGO

(R.E.T.) **SOLUTION**

Level 1 -
Level 2 -
Level 3 -



3-Prong Attack (immediately and simultaneously)

Signed

DOB

21/3/94

Housing Specialist / Space Planner

Phone

637-0924 sl

EDUCATION

WITH

SERVICE

The Family

① Fam.

Two or more people related by blood, marriage, mutual consent or adoption, sharing the same residence, eating from the same pot, inter-relating and sharing responsibilities and transmitting the culture.

The Family is the most important agent of socialization in all societies. The length of time spent together shapes the development of society.

The family is a group in which all the members can have constant face to face contact with each other.

This allows for close observation of the child's progress and individual adjustments to be made.

The Most Meaningful and effective kind of social interaction for the purpose of socialization, is mainly that of Emotional Content, more so than that confined to the intellectual level.

Three Major Goals of Socialization ② Fam.
within the family are that the parents
should teach the child :-
① Self Control beginning with Toilet Training
② Values
③ Role Behaviour.

The Principal Problem in the socialization
of children is Motivating them to learn
the Culturally Patterned Behaviour,
taught by their parents encouraged
by Rewards or Punishment.

Functions of the Family

1. Reproduction for the Continuation of the Species.
2. Protection of its members for survival.
3. Provision for its members for nourishment and emotional health.
4. Socialization

③ Fam.
Although the Family has been the Prime Socializing Agent in all Societies, it is not necessarily a very effective or efficient socializer, for the following reasons: -

- ① Parents have little training for this task
- ② They have scant understanding of the process of Socialization.
- ③ Their goals may be fuzzy and unspecific (not focussed)
- ④ They offer reproduce/continue to do, what they able to remember of their own upbringing.

In Addition when the immediate Community and wider Society does not provide adequate intervention and support, dysfunctional behaviour creates great pressure for the managers. of nations.

* Emotional Intelligence *

is the capacity for recognizing our own feelings and those of others, for motivating ourselves and for managing emotions well in ourselves and in our relationships.

Emotional Intelligence has five components:-
1) Self awareness 2) Self regulation
3) Motivation 4) Empathy 5) Social skills

- 1) Self awareness: Knowing what we are feeling in the moment and using those preferences to guide our decision making.
- 2) Self regulation: Handling our emotions so that they facilitate rather than interfere with the task at hand. Delaying gratification to achieve goals.
- 3) Motivation: Using our deepest preferences to guide us toward our goals. Persevering in the face of setbacks.
- 4) Empathy: Sensing what people are feeling.
- 5) Social Skills: Handling emotions in relationships well and accurately reading social situations and networks. Using those skills to lead, negotiate and settle disputes.

Emotional Skills can be learned and unlike IQ a person's EQ can increase over a lifetime. Change requires the "retooling of ingrained habits of Thought Feeling and Behaviour."

AAW

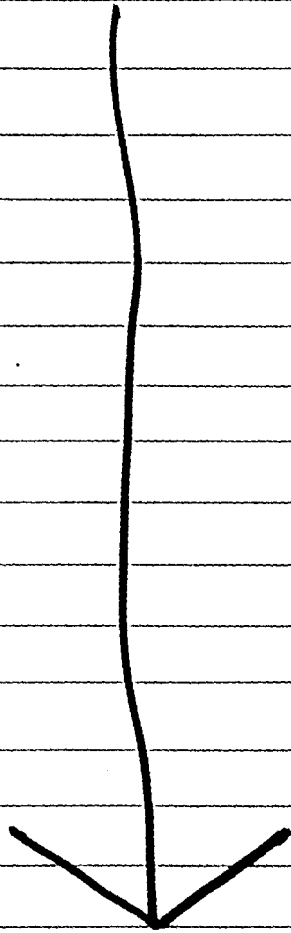
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A 3-LINE PAPER
ON
DOMESTIC VIOLENCE

DOMESTIC VIOLENCE



THE BOTTOM LINE

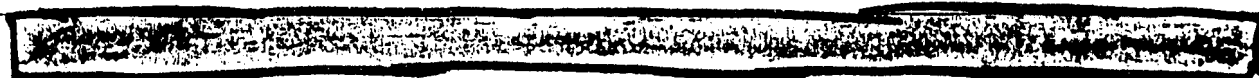


PHYSICAL

SECONDARY

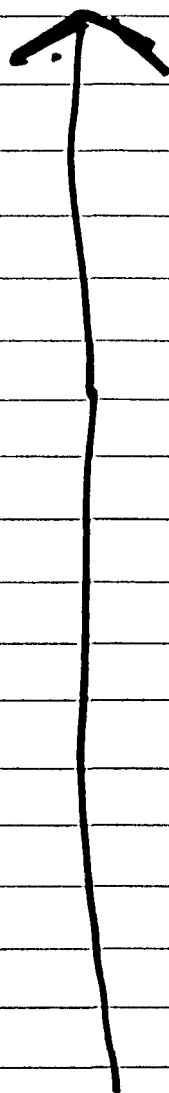
THE TOP LINE

PROBLEM.

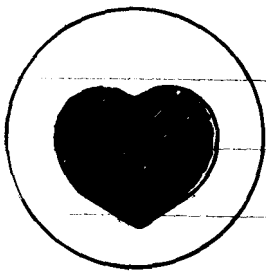


PSYCHOLOGICAL

PRIMARY



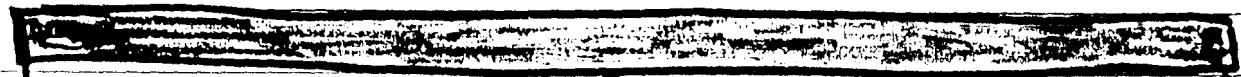
DOMESTIC VIOLENCE



THE TOP LINE

THE MIDDLE LINE

NO-51-02



LEVEL 1

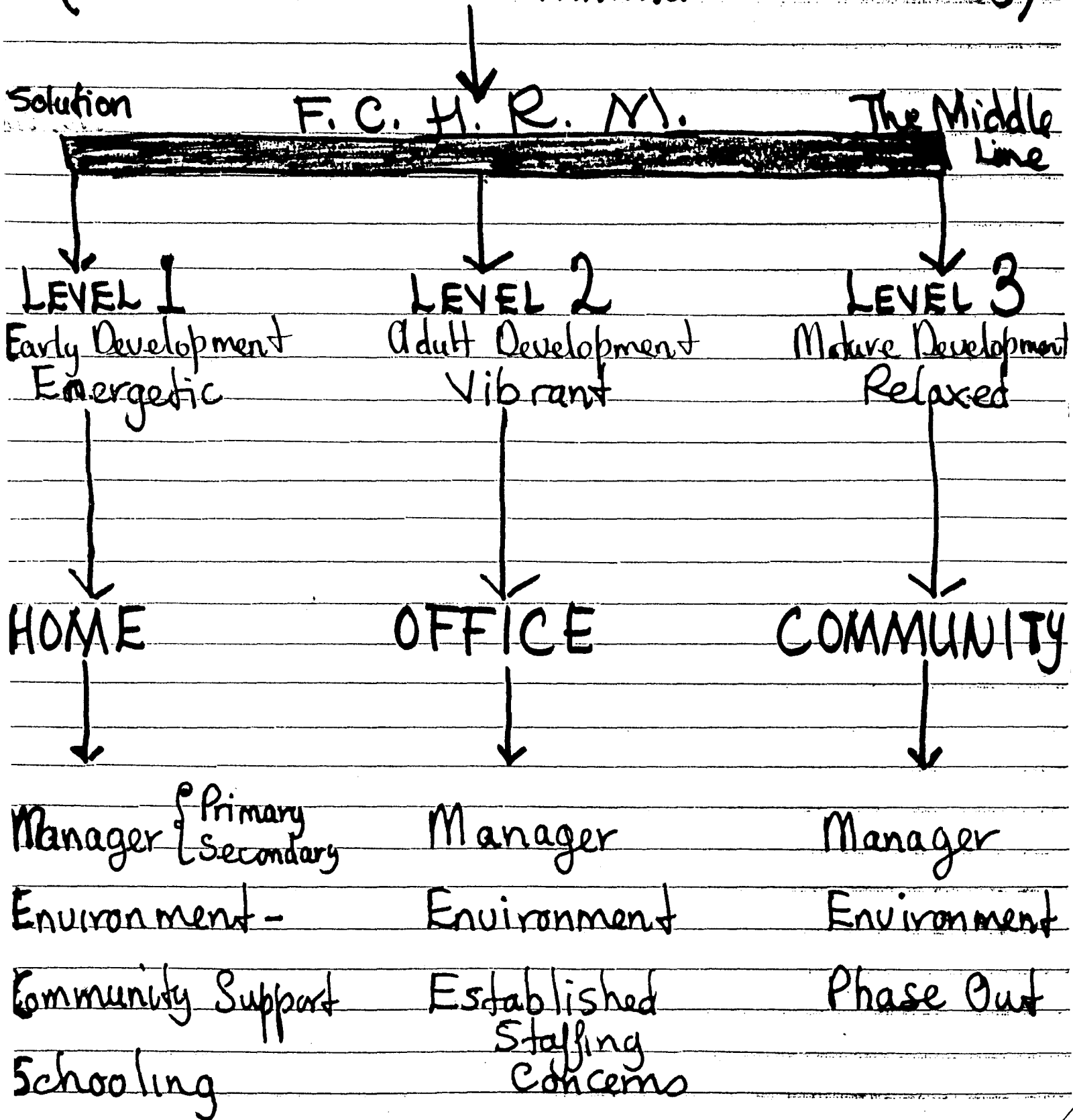
LEVEL 2

LEVEL 3

FULL CYCLE HUMAN RESOURCE
MANAGEMENT

THE BOTTOM LINE

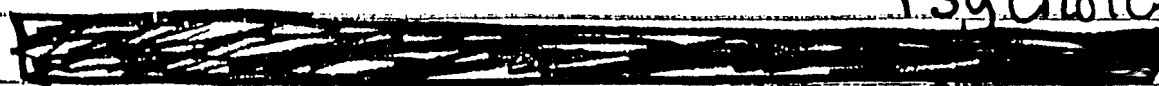
(HUMAN RESOURCE MANAGEMENT Policy)



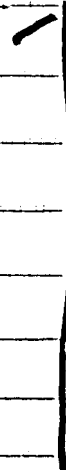
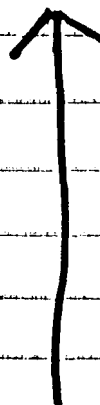
- correction of maladjustment
- preparation for Level 3

TOP LINE

PROBLEM

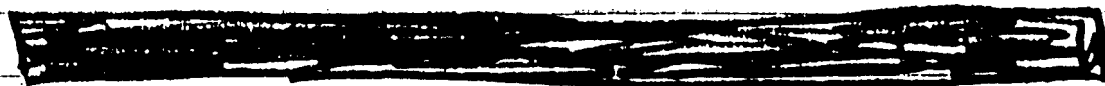


Psychological
Primary

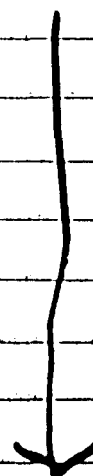


MIDDLE LINE

SOLUTION

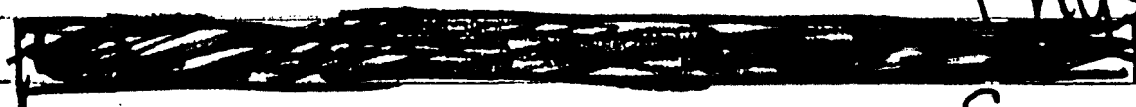


F.C.H.R.M



BOTTOM LINE

PROBLEM



Physical
Secondary

A 3-LINE PAPER

* Details Pg 5 and 6 *

①

Here is where we start looking at "The Middle Line" on which the Solution is achieved utilising Human Resource Management, implemented under a Comprehensive Human Resource Management Policy, that provides for Full Cycle Human Resource Development.

Presently, Human Resource Management training and practice, concentrates solely on Personnel Development in the adult work environment, that is, staffing concerns, the 2nd level on the Middle Line, which erroneously conveys the impression that the Human Resource, only attains importance and requires good management, as an adult.

This practice, supported by all the insensitive laws and regulations, have been showing, over the years, to be the producer of many social ills.

There are attempts, uncoordinated as they may be at present, to address Human Resource Management, at its 1st and 2nd Levels, the "Early Energetic" and "Mature Relaxed" Stages of Human Development, respectively.

We have some NEW INITIATIVES like,

- (1) Senator Wyatts Bill to Recognize Womens Work In The Home.
- (2) Ministry Of Social Affairs Utilisation of NGO'S In The Delivery Of Social Services.
- (3) The Retired Experts Programme, Using Retired Experts In The Communities Where They Live, For Teaching Purposes.

Then there are the EXISTING ATTEMPTS,

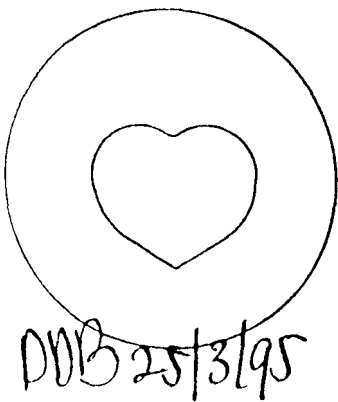
- (1) Ministry Of Community Development, Community Education Programme.
- (2) NGO's Participation In Community Problem Solving, namely The Rape Crisis Centre (RCC), The Various Feeding Groups, The Alternative To Custody Group, and many others.
- (3) The Community Watch Group Activities.

But these and others, operate outside of a "COMPREHENSIVE HUMAN RESOURCE MANAGEMENT POLICY"

Such a POLICY when formulated would have to recognize, FORMALLY, the Managers at LEVEL ONE and Level THREE and give EQUAL Consideration as Exists at LEVEL TWO.

AT LEVEL ONE, we will then RESPECT and APPRECIATE the following:-

- (1) The FIRST MANAGER in the LINE. The WOMAN Managing the GROWTH, BIRTH and EARLY NATURING YEARS of the HUMAN RESOURCE, with reasonable Compensation being dispensed.
- (2) That ADEQUATE, EFFICIENT and COMFORTABLE space, must be made available in order to properly MANAGE the HUMAN RESOURCE at this Crucial Stage of Its DEVELOPMENT.
- (3) That COMMUNITY SUPPORT SERVICES has to be in place and FULLY OPERATIONAL.
- (4) That the SCHOOL CURRICULUM, spreads the GOSPEL of EQUAL BUT DIFFERENT INDIVIDUALS, emphasising the IMPORTANCE of the KNOWLEDGE OF SELF, before the HARMONY OF SHARING IN COMPANIONSHIP.



(P a g e S i x)

AT LEVEL TWO, Good Working Guidelines have already been FORMULATED. The Experts will now have to be INTRODUCED , if they are not already there, to CORRECT any Lingering Maladjustments, carried over from adhering to years of BAD EXAMPLE, set by our Past Leaders.

These EXPERTS will also have to PREPARE EVERYONE for the next LEVEL of HUMAN DEVELOPMENT, the Mature, Relaxed Phase, LEVEL THREE.

AT LEVEL THREE, the same emphasis on RESPECT and APPRECIATION will APPLY in:-

- (1) The Provision Of Reasonable Compensation For Labour and Adequate and Safe Environments To PERFORM IN.
- (2) A " PHASE OUT PROGRAMME " to allow those who have no more ENERGY to GIVE, to be RECIPROCATED in CARE by the YOUNG ONES who are now fully CONSCIOUS of the CONSIDERATION given at all LEVELS/STAGES of HUMAN DEVELOPMENT and EAGER AND WILLING to join the LINE at LEVELS TWO and THREE, when their number is CALLED.

Concluding That VIOLENT BEHAVOIR Will Only Emmanate From Individuals With
CHEMICAL INBALANCES In The BRAIN, Since Civilisation Has Adjusted Its Structure
To Correct Societal Disadvantages.

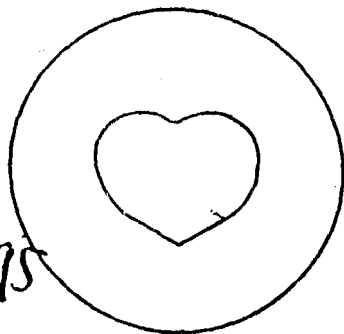
(F L I P T O C H A R T T E N)

A 3-LINE Paper On DOMESTIC VIOLENCE. A TOP LINE PROBLEM

A BOTTOM LINE PROBLEM

A MIDDLE LINE SOLUTION.

THANK YOU LADIES AND GENTLEMEN FOR YOUR PATIENT ATTENTION, WITH SPECIAL
THANKS TO THE NATIONAL WOMENS CAUCUS FOR ALLOWING ME THIS OPPORTUNITY
TO SHARE SOME OF MY RESEARCH WITH YOU.



DOB 25/3/95

Men Against Violence Against Women



* P.O.R.O. *

Date: Sun/24/Nov/96
Ref.: M.A.V.A.W - IDA V TW/11
Phone: 637-0924/668-5133

MAVAW's Contribution To The International Day Against Violence To Women

FEMALE GENITAL MUTILATION (FGM)
MAXIMUM MALE OPPRESSION AND
HORRIFIC GIRL CHILD ABUSE.

HORRIFIC GIRL CHILD ABUSE.

* contents *

- 1-Introduction & What Is F.G.M.
- 2-When & Where Did F.G.M. Start & Done
- 3-Why Is F.G.M. Accepted.
- 4-What Are The Effects Of F.G.M.
- 5-Who Is Trying To Stop F.G.M.

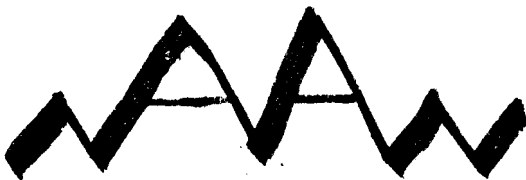
Management Coordinators:

Donald Berment

Donald Berment

David Law

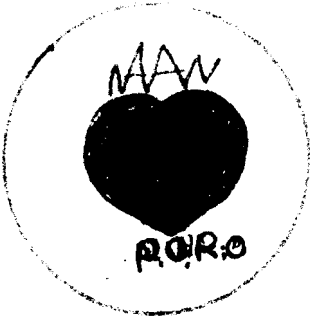
Johnny Bharath



Bankers: Royal Bank, St. James. Account Number 9417004034

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* To Whom It May Concern *

INTRODUCTION :

On Sat/16/Nov/96, at around 10pm, AVM Channel 4 TV, showed a movie, produced by a Canadian citizen, titled "A SCREAM FOR SILENCE". This film, in my view, should be seen by all men, since it graphically depicts, both by acting and real life sequences, the level of distress experienced by women and girls, caused by historically entrenched male domination, oppression and insecurity.

Although the segments of the film on the act of rape were horrifying, the segment on female genital mutilation (FGM) exposed the most destructive form of child abuse that existed and which still exists/occurs in various parts of the world.

Records show that FGM, practiced by many families who still...

Records show that FGM, practiced by immigrant families who still adhere to this cruel tradition, now start at 6 years of age, because girls who are growing up in different cultures are rejecting the practice. In most areas it started from 8 years until the onset of menstruation.

In the West doctors amputated clitorises and ovaries in the 19th Century, as a treatment for epilepsy, hysteria, lesbianism, masturbation, melancholia and nymphomania.

As recently as the 1950's, American and European doctors performed clitoridec-tomies to treat nymphomania and melancholia.

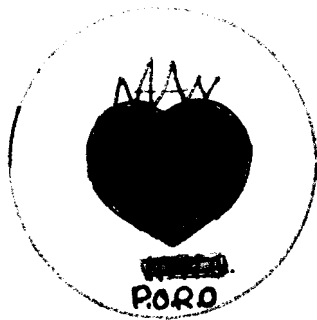
Having first read of FGM in the Sunday Express, page 3, 6/Nov/1994, and on four occasions thereafter, I was still very unprepared for the shock of actually viewing the mutilation of a young girl, shown in the film movie.

As a member of the Organisation, Men Against Violence Against Women, ...

AAW

—/2
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Men Against Violence Against Women.

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..... (MAVAW), I felt constrained to put my feelings on paper and share my information with the public through this medium. You may find the following graphic, but let me assure you, it falls far short of the effect of actually viewing the mutilation on a TV Screen.

WHAT IS FGM (Female Genital Mutilation)

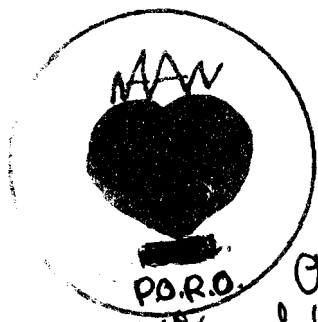
FGM is the removal of part or all of the female genitalia. The procedure can simply be a small but painful nick across the hood of the clitoris, as is accepted by the Islamic community in Hargeisa, capital of Somaliland, in northwestern Somalia. However, more extreme forms of mutilation are common. The mildest form of excision in FGM is analogous to circumcision, the removal of the foreskin on the male genital, and entails the removal of the hood of the clitoris. The more severe form involves partial

severe form, involves partial or total removal of the clitoris, the organ of sexual pleasure in women, and all or part of the labia minora. The most extreme form is called Infibulation, during which the clitoris, inner labia (minora) and most of the soft flesh of the labia majora, are cut off and scraped away respectively. The two sides of the vulva are then fastened with acacia thorns, catgut, silk or a glue made from a tree gum or eggs, and the girl then bound from waist to toes, immobilised for weeks, until the scar tissue nearly seals the vagina. Sometimes the girl bleeds to death and she is left just a pencil thin hole close to the anus for urination and menstruation. The crude stitches fashion a chastity belt of the girls own flesh, in order to make sexual intercourse impossible until she is married and her husband cuts or tears it open.

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Men Against Violence Against Women

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Almost all Somali women are circumcised and 87% of them have undergone the most extreme form, -infibulation-

The World Health Organisation (WHO) estimates that up to 120 million females alive today, in at least three dozen countries have been circumcised. UNICEF says most girls are between the ages of 4 and 10 when they undergo the rite.

Sudanese surgeon and women's activist Nahid Toubia reports that an estimated 85 to 114 million girls and women in the world are genitally mutilated.

According to a UN background paper in 1993, women are among the chief victims of violence. Female infanticide, sex-selected abortions and severe neglect, have effectively reduced the number of women in South Asia, North Africa, the Middle East and China by 100 million. Said paper also noted that in 2,000 worldwides in ...

in 2,000 worldwide is reported to have been raped, one third of wives in developing countries are estimated to be battered and at least 90% of violence in the home^{is} against women and children.

However, infibulation is no guarantee of virginity. At the Hargeisa orphanage, 40 of the 110 children were abandoned by their unwed, circumcised mothers, who were cut or torn open, willingly or unwillingly, by the men who impregnated them.

WHEN DID FGM BEGIN

No one knows exactly when or how the practice began, though scholars speculate it originated along the Nile Valley. The earliest literary references, dating from 2000 BC, indicate that ancient Egyptians, Jews and others performed the surgery. Some scholars believe nomads invented infibulation, cutting and sewing closed the vaginal opening —

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to keep women herders monogamous and to protect them from rape. Others have suggested it may be a form of primitive population control, perhaps imposed by slave owners who did not want their women unable to work.

WHERE IS FGM PRACTICED

Earlier reference in the the Introduction was made by the practice in the 19th Century by Western doctors and in the 20th Century by American and European doctors.

Although female circumcision is not prescribed in the Koran, it is most commonly practiced by Muslims. Yet the practice does not exist in Saudi Arabia, home to the holiest places of the Islamic world, or in many other Muslim countries, including Algeria, Iraq, Syria and Tunisia.

In an interview in Hargeisa, a prominent Islamic leader, Ibrahim Ahmed Hussein said "There is no evidence that the Prophet M.I."

... ..
"There is no evidence, that the Prophet Mohammed ordered the circumcision of his own daughters".
"For women, it is sufficient to just make a very small cut in the hood of the clitoris. Cutting and sewing is nothing to do with Islam".

FGM is the revered rite of passage in parts of Africa, the Middle East and Southeast Asia. Immigrants are taking the practice with them to Europe, Australia, Canada and more recently America. Ejua Oakenoo, founder of the African women's group FORWARD in London, says that despite a 1985 law banning the practice, thousands of girls who live in Britain are still mutilated each year by unscrupulous, British doctors or through being sent by their families somewhere where it is not illegal such as France.

Egyptians need a licence to carry out the

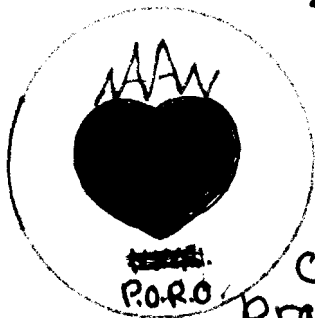
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... operation and Sudan is the only African country to ban the extreme form of the practice, infibulation.

WHY IS FGM ACCEPTED

FGM has been continuing for centuries and women are conditioned to accept it. - if they don't they will be rejected by the community and not get a husband. In many parts of rural Africa, women are told that their clitoris will threaten the health of a newborn child, reduce fertility, secrete foul smelling fluids and grow so long that it will touch their thighs. Some even believe that a woman's external genitals are unattractive so it is better to remove them in order to be more beautiful.

Linked to chastity and fidelity in many African and Middle Eastern Cultures, FGM has been justified as a means to keep women docile and hard working. Feminists contend it also effectively removes

... and hard working.
Feminists contend it also effectively removes pressure on men to please women sexually and is the best way to curb a woman's sexual pleasure and jealously guard her chastity.

In practising countries, women who are not circumcised are considered less desirable or even prostitutes. Often a virgin brings a higher bride price or dowry. The greatest insult in Somalia is "son of an uncircumcised mother".

The most frequent reason offered for female circumcision, is to stifle a girl's desire for sexual intercourse and to make penetration impossible, preserving her chastity. These cultures believe that the only value of a girl is her virginity. The main thing is to protect the girl from losing self control and from men until she is ready to be married.

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Because marriage is an economic necessity in countries where it is prevalent, FGM is "seen as an act of love rather than one of cruelty" said Dr. Mohammed Haddi, an obstetrician and gynecologist in Hargeisa, Somalia.

Ejua Dorkenoo, the WHO's expert on FGM, based in Geneva, said genital mutilation is closely linked with poverty, illiteracy and low status of women. Among its strongest proponents are the midwives and barbers who perform the act with a razor a scissors or shard of glass. Some charge 5,000 shillings (US 3.00) a girl, others as much as 92,000 shillings (US 55.00).

WHAT ARE THE EFFECTS OF FGM

At best it destroys a woman's ability to experience sexual pleasure. At worst, it means she cannot have intercourse without pain, or menstruate or even urinate comfortably.

... worst, it means she cannot have intercourse without pain, or menstruate or even urinate properly. If she does manage to get pregnant, she has to be literally cut open to give birth.

When in Somalia, a girl child is infibulated, she is fed only sticky white rice to keep her stool soft and is allowed just one cup of tea a day. She has yet to feel the pain of passing urine, which will burn like fire until the wounds heal. When her legs are unbound in up to 40 days, her childish gait will have become a shuffle. It may take her a quarter of an hour to urinate, drop by drop. And she may have a kidney or bladder infection. When her menstrual periods start, they will last ten days (10) and she will be incapacitated by cramps nearly half the month — 17

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... caused by the near impossibility of flow passing through so tiny an opening. The odour of soured blood will linger. If the wounds heal improperly, shiny keloid scars will criss cross the otherwise soft tissue of the vulva. Child birth will be difficult and the thick scars may have to be cut through to the rectum. Women who deliver end up ripped to pieces said one obstetrician. The risk of maternal death is doubled by FGM and the risk of still birth increases several fold, the World Health Organisation says. If the labour is long and difficult, the pressure of the foetus's head may cause fistulas, abnormal openings. Unless the damage is repaired, urine and faeces may leak into the vagina, then seep uncontrollably down a woman's legs. Many women are unaware that their long term health problems result from FGM.

problems result from ^{short} their long term health FGM.

WHO IS TRYING TO STOP FGM

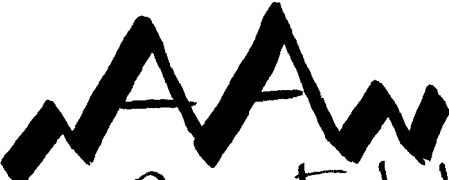
In Nov/1994 a draft decree was published in Nigeria, which made female circumcision (FGM) punishable by a seven (7) year jail term.

London banned the practice in 1985.

Sudan banned the extreme form of infibulation.

Sweden is the only Western country with laws to prosecute parents who have sent their daughters abroad to be circumcised.

Women's groups in Egypt have taken the Health Minister to court for allowing doctors in government hospitals to perform female circumcisions (FGM) and the

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Egyptian Organisation for Human Rights has launched a national campaign to combat the practice.

In 1993 the United Nations adopted the Declaration on Violence Against Women and a year later, appointed a special rapporteur to monitor such abuse.

Canada accept FGM as a reason to grant asylum in 1993 and this year passed a bill banning the practice by immigrants who adhere to FGM as a rite of passage for their girl children.

The United States has so far granted three (3) women asylum on this ground, but has addressed the matter on a case by case basis, without a formal change of policy.

... , without a
major change of policy.

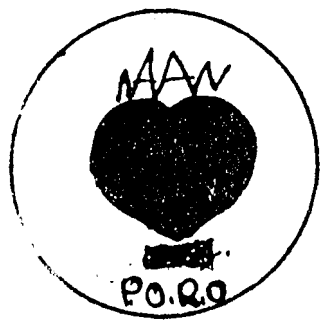
The self-declared independent Republic of
Somali land in North western Somalia, and its
government, with the support of UNICEF is trying
to eradicate female circumcision by 2000.

Sources:

- 1/ Sunday Express 6/Nov/1994 - Pg 3 - Lagos AFP
- 2/ Wednesday Newsday 22/Mar/1995 - Pg 15 - Reuter
- 3/ Wednesday Newsday 24/May/1995 - Pg 8 - Reuter
- 4/ Monday Newsday 29/April/1996 - Pg 22 - Reuter
- 5/ Monday Guardian 15/July/1996 - Pg 18 - AP.

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Date: Wed/13/11/96 Reg: UWI/MAVAW Ph 637-0924

Men Against Violence Against Women.

* The Men's Movement & Domestic Violence *

Seminar Room:

Centre For Gender and Development Studies.

ARTOM

MAVAW

MEN

12 pm - 1.30 pm.

* HEADS *

- 1/ The Movement Foreign (Ending The Brutality)
- 2/ The Movement Local (Mental Revolution)
(A Realistic Approach)

3/ The Relation To Domestic Violence
(FCHRM)

4/ The Future
(Manhood as a Choice)
(Maleness as a Gift)

sources: CAFRA and other local NGO's
: RET
: 3-Line Paper

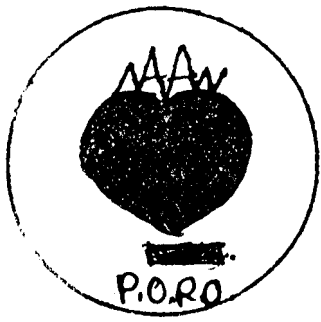
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Wed/13/11/96

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The Movement Foreign (Ending The Brutality)

Mark Ethin, Canadian M.D., husband, father and co-founder of Manitoba Men's Network, when discussing the Men's Movement in 1991, explained that prior to and then, women's concerns centered around sexual assault, wife abuse, pay and power disparities. All men and a patriarchal society were held responsible.

Today, in Trinidad & Tobago, men have accentuated child neglect, lack of respect as equals, lack of appreciation for difference and lack of proper space management requirements; adding these concerns to the list of ills which men should be held accountable for.

In Canada and the U.S.A, three components of the men's movement were identified by him. They are:-

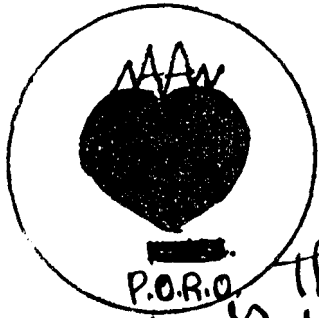
- 1/ the pro-feminist men's movement, alternatively called, "the feminist men's movement" or the "anti-sexist men's movement", which traces its roots to post 1950's feminism, about 40 years ago.
 - 2/ the men's rights movement, alternatively called, the "non-feminist men's movement" or "the fathers' rights movement", which traces its roots to men's "backlash organisations", one of which, in the late 1950's, initiated a lobby to force women out of the work force and back into the home.
 - 3/ the spiritual men's movement, which calls for a return to an understanding and experiencing of the "deep masculine" archetypes. Its main spokesperson poet and translator, Robert Bly, focuses on the pain men experience because of the widespread lack of fathering, that is, developmental neglect.
- The movement foreign, as explained by Mark Etkin

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Wed/13/11/96

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..... Mark Etkin, if it can be called a movement, he noted, has different faces. The most important distinction between them, is where they stand in relation to feminism. Unlike Mr. Etkin, I am very sure, that it is a movement, men have to move or they will be moved, towards the mental revolution required, in order to recognize women as equal and to appreciate their difference. Over the last 14 years we have seen 3 movements that signals the seriousness of our intentions, locally. In addition, after analysing Mr. Etkin research, most will agree that there was and maybe there still is a non-progressive element of separatism in those three components of the movement, foreign.

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(2) The Movement Local

(Mental Revolution - A Realistic Approach)

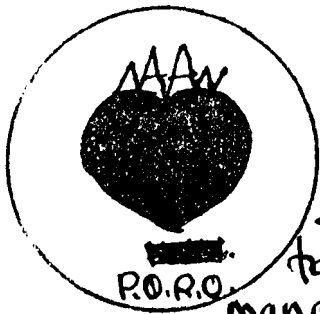
The movement locally, distinguishes itself firstly, by being non-separatist. All four emerging components provide for joint and/or common participation by women. MAVAW has a joint activist section and a common area of friend and resource person. MEN, Mens Enlightened Network, has a joint observer section. AR TOM has a joint section, as exist in the Committee of the Womens Affairs Department of the Ministry of Community Development, Culture and Women's Affairs.

All four emerging components are also focussed on changing attitudes; the mental revolution or as our beloved Prime Minister would say, a paradigm shift in our thinking and behaviour.

Prior to 1994, the attempts to deal with the way men chose to perform in "manhood", or as Tracey would say "the praxis of masculinity" were concerned with reactionary solutions. Mixed supervisory groups, attended to the symptoms in people originating from

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AAW Coordinator Donald Berment
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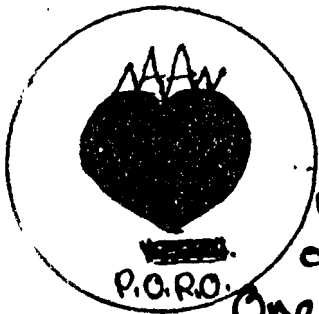
.... from dysfunctional homes and to some extent, biological reasons. Attention was paid to alcoholism and other drug abuse, poverty management, battered women, abused children, sexual assault victims, mentally and physically challenged persons, prisoners and their families, sexual and reproductive health etc.

In February of 1994, MAVAW was conceptualised. The mixed participation continued with the National Women's Caucus, a feminist organisation. Men performed in the NWC as activists, the secondary level in MAVAW philosophy. This philosophy, also provided for men's individual involvement, in the movement at 2 other levels, a primary/practicing and a tertiary/high profile levels. The 3-Level structure was considered to be adequate, to allow men, with different degrees of commitment and consciousness, opportunity to grow and develop, making the choice of manhood, work for the survival of the human race.

Wed/13/11/96

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areas specified, utilising the services of a maximum of 3 co-ordinators and a maximum of 6 assistant co-ordinators.

One year later, in 1995, AR TOM was conceptualised. Tracey will tell you more about that.

Another year later, April 1996, MEN was conceptualised by Oswald Pierre within the Family Planning Association.

In September of this year the Women's Affairs Department in the Ministry of Community Development, Culture and Women's Affairs started putting together a male support group and we are planning a "Male Awareness Week" for December 1996. Johnny will answer questions on that.

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The Relation To Domestic Violence (FCHRM)

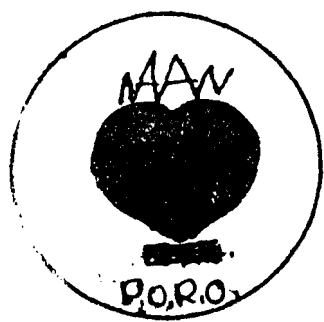
Allow me now to say something about the men's movement and domestic violence. Until we formulate a human resource management policy, that considers and provides for the full cycle of human development we will not realistically deal with Domestic Violence in a holistic way.

Let us look at this concept with the help of some flip charts, starting first with the Ripple Effect Theory on Crime and then a 3-line paper explaining "Full Cycle Human Resource Development".

(refer to page 5 and 6 for details)

AAW

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Date: Wed/13/11/96 Ref: U601/MAVAV

Ph 637 0924

Men Against Violence Against Women.

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The Future (Manhood as a Choice) (Maleness as a Gift)

The future decision we have to make ladies and gentlemen, right now, is simple. We shift our paradigms or destroy ourselves.

Men must fully realise and appreciate Maleness, only as a Gift, with Manhood being a choice that is practiced for the survival of the species.

Those of us who have made bad choices have to be reached and oriented towards acceptable behaviour.

Violent behaviour in relationships is learnt, therefore it can be unlearned.

The factors that have to be addressed for this new dispensation/orientation, MAKAW'ism, if I may, are three fold :- viz.

— our superiority complex

— our inability to control our anger

— our unresolved internal conflict brought over from painful childhood experiences.
The Road Forward is Obvious.

Thank you for your time, ladies and gentlemen.
Enjoy the rest of the day.

 Coordinator Donald Berment . . .
45 River Estate Circular - River Estate - Diego Martin.

* TITLE *

Masculinity
Construction.

A Critique
And

Experiential

Perspective

(20 min)

*

Nov. 10 - 1997 - DDB.

*

Holiday Inn - San Fernando Rm.
Monday 10th November 1997

* WORKSHOP *
Domestic Violence - A Focus on Male
Perpetrators

Management Coordinators:

Donald Berment

Donald Berment

David Law

David Law

Johnny Bharath

Johnny Bharath

Executive Summary

(After Being Introduced ... my comments)
A pleasant good morning ladies and gentlemen. For those of you who follow the interactive media, the radio and TV talk shows, I am known as Mr. River Estate. I will begin my presentation, titled, "Masculinity Construction - A Critique and Experiential Perspective", with an Introduction in which I will look at the guidelines laid down by the pioneers as regards male behavior. I will then examine the Caribbean Thrust and the Difference from the International Thrust, ending in aspects of my first discussion at linking the Mens' Movement to Domestic Violence. I will then explain the basis for my critique of Masculinity, Power and Personality Structure, developing each area conservatively. I will conclude with a postulation on Spirituality (God) and recommend a solution.

It was an extreme pleasure preparing this presentation, I sincerely hope you enjoy it.

Management Coordinators:

Donald Berment

Donald Berment

David Law

David Law

INTRODUCTION

Date: 12/11/12
Ref: M.A.V.A.W - DDB/MC-1

Phone: 637-0924/668-5133

In 1991 Mark Etkin, Canadian M.D. husband, father and co-founder of Manitoba Men's Network, in reviewing the "Mens Movement" with a sub-heading "Ending The Brutality" suggested that important work remains to be done in several areas.

- 1/ Men need to be more vocal against violence against women and children.
- 2/ Men need to realise that pornography defines and limits our sexual experience and that its aim is to control our sexuality and our pocket books.
- 3/ Men need to be more active in discussing the male experience, including the experience of being the oppressor of women.
- 4/ We need to discuss the way sexism limits us.
- 5/ We need to support other men who are trying to make positive changes in their lives.
- 6/ And we need to develop role models and definitions of masculinity that are male defined, non-sexist, compassionate, energetic, sexual and whole.

THE CARIBBEAN THRUST

—/3

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David Law

David Law

THE CARIBBEAN THRUST

Those suggestions, activist in nature, blossomed in 1994 with an emerging Caribbean Men's Movement, in the form of MAVAW (Men Against Violence Against Women) MEN (Men's Enlightened Network) ARTOM (Association For The Reorientation And Transformation of Masculinity) and MSC (Male Support Committee) in the department of Women Affairs, all Trinidad and Tobago based.

In 1991, Fathers Incorporated was conceptualized in Jamaica. Barbados has the National Men's Fellowship Association and St. Lucia, the Mothers' and Fathers' Union. Belize in 1996 was in the process of putting together a men's group called "The Brothers of BOWAND". BOWAND is a Belize feminist organisation (Belize Organisation For Women and Development)

THE DIFFERENCE

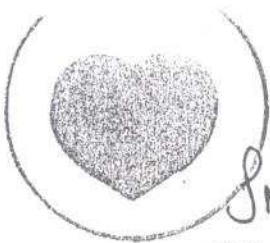
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Donald Berment

David Law

David Law



THE DIFFERENCE

In addition to its sociopolitical, activist, support, research agenda, the Caribbean Movement, in studying Men and Masculinity, differed from the work done between 1970 and 1990 by way of focus in two ways:-

- 1/ including the manifestations of men's anger alongside men's power and pain.
- 2/ co-operating with the feminist movement in a by-feminist methodology of joint or in common association.

As a member of MAVAW, I am now recording a measure of discomfort with the work done between 1987 and 1990 which places its emphasis on analysing different masculinities and the contradictory experiences of power.

FIRST DISCUSSION

In November of 1996, in another place, I began the analysis of the Men's Movement and its relation to Domestic Violence, highlighting the difference between the local and foreign components of the movement noting that the future lies in our accepting Maleness as a gift and Manhood as a choice. That analysis is available from the Center for Gender and Development Studies, St. Augustine Campus.

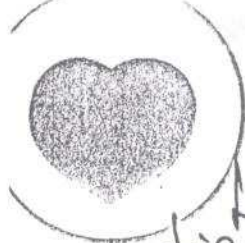
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Management Coordinators:

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David Law



Date: Mon/10/Nov/97
Ref: M.A.V.A.W - DDB/MC-1
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EXPLANATION

Let me explain the reasons for my discomfort with the academic postulations to date, on power masculinity and personality. First let me place these three important words within the context of Masculinity Construction. Maleness is a gift of sexual difference from God. Manhood is the choice practiced using the best qualities of masculinity for the common goal of survival of the human species. The praxis of masculinity is intricately linked to personality development and the element of power. Maleness is a whole concept as is Femaleness. Masculinity is the distinguishing qualities of the male sex. Since we have one male sex, we have one masculinity. The discourse on a human being, who is in between male and female is appropriately carried on in the relevant scientific community. We await their description of such a praxis.

MASCULINITIES

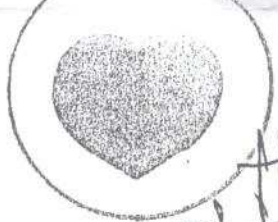
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Management Coordinators:

Donald Berment

Donald Berment

David Low



MASCULINITIES

Date: Mon/10/Nov/97

Ref: M.A.V.A.W - DDB/MC-1

Phone: 637-0924/668-5133

Harry Brod, the most voiceferous proponent of the concept of different masculinities argues that if "gender" is not natural difference, but constructed power [and thus] a "relational concept" then the studies of different masculinities is critical for the understanding of a male-dominated society. His contemporary, Dierdre English has put it more bluntly, quote "whether we love men or hate them, we as feminists have no task more necessary than understanding them," unquote. I argue that gender is "natural difference" and is therefore a "relationship concept". I further state that since men and women are essential for the continuation of the human race, we are equal. However, we must introduce the concept and practice of "Equity" in our research, teaching and solutions, to provide for the necessary differences in the whole process of socialization and reproduction. It would follow naturally then, that we study man as a constructed masculinity and woman as a constructed femininity. The variety of relationships in society, gay, lesbian, bi-sexual, do not indicate —/7

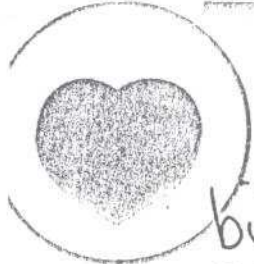
Management Coordinators:

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David Law

David Law



Date: Mon/10/Nov/97

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Phone: 637 092 4468-133

do not indicate fundamental differences but consequential ones, originating from genetic composition in some instances and/or environmental socialization. (fracturing if you may)

POWER

To further cloud the issue of a singular masculinity vs. different masculinities, Samuel Bowles and Herbert Gintis in their 1987 text "Democracy and Capitalism" postulate, and they have academic support, quote, "power is heterogeneous obeying no simple logic. Distinct structures of power are not merely juxtaposed, they are bound together in a common process of social reproduction. Because people's lives are generally governed by more than one distinct power structure, for example, one may be a worker, a wife and a citizen, we experience power as heterogeneous," unquote. Power defined, is seen in a relationship context as our capacity to dominate and control humans or the world around us. What the academics have left out in their definition is the aspect of control over self, therefore not being able to realise the simple logic in power.

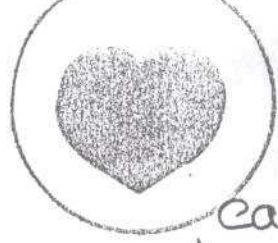
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Date: Mon/10/Nov/97

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.... logic in power.

In my view, power is homogeneous as a capacity to control and dominate. Power however, exist in two distinct dimensions, an External one and an Internal one. Further, power acts on the three conscious states of a human being i.e. the physical, the emotional and the spiritual.

Internally and in singular mode a person can develop high degrees of control and dominate the consciousness of their personal physical, emotional and spiritual being, which when at equilibrium radiates peace and is extremely immune from external power, without seeking to exercise external power.

Externally and in plural mode a person or persons can develop similar high degrees of control and dominate the consciousness of other human beings physically, emotionally and spiritually. Both of these power dimensions are homogeneous and the success within each depends on the corresponding failure of the other. When power reaches equilibrium in the two ~~external~~ dimensions, we as the human race would have achieved world peace.

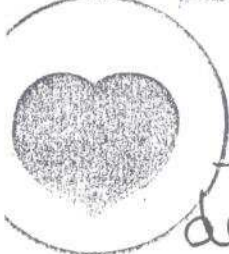
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Management Coordinators:

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..... world peace.

this postulation on Power, which will be developed and published at a later date, removes the use of its heterogeneity in, furthering the concept and study of different masculinities; incidentally a line of thought only developed in "men's studies". To date, I have not heard or read our women feminists or otherwise, discussing different femininities and the heterogeneity and contradictions of power in female relationships.

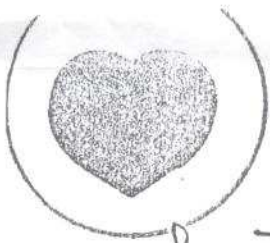
The words of Michael Kaufman Ph.D, in an article in the Men's Studies Review on "A Framework for Research on Men and Masculinity" is applicable here, quote, "For men's studies this means establishing a relationship between intellectual practice, political organizing and personal change. Building links to ongoing attempts to organize and politicize men and women along anti-sexist and anti-patriarchal lines is key. It allows us to maintain political balance, to appreciate the sensitivities of intervening as men against sexism, to respond to the concerns of men and women from different walks of life engaged in a variety of political and cultural practices, to avoid isolation within a middle class academic community and to help ensure that what we do will make a real contribution to the process of social change". unquote

Donald Berment

Management Coordinators:

Donald Berment

—/10



...social change." unquote

Date: Mon/10/Nov/97
Ref: M.A.V.A.W - DDB/MC-1
Phone: 637-0924/668-5133

PERSONALITY STRUCTURE

I will conclude my presentation with a brief look at personality development and Masculinity Construction. The concept of personality structure now generally followed is that proposed by Sigmund Freud, who postulated three psychic segments in the structure of the personality. While these structural divisions are hypothetical, they offer a useful classification of the system of human drives. They are, the ID, the Ego and the Superego.

The ID is a collective name for the primitive biological impulses. It represents the innate portion of the personality. The physiologically determined drives for air, food, water and other nutrient substances, maintenance of bodily temperature and physical integrity and procreation are thought of as ID functions. Associated with these primitive drives are the protective aversive states of pain, distress, and rage and the cravings to satisfy hunger, thirst and avoid suffocation.

The Ego, or reality-testing self, is that part or function of the personality that establishes a relationship with the world in which we live. The Ego deals with the environment through conscious perception, thought, feeling and action.

... feeling and action.

It contains the evaluating, judging, compromising, solution-forming and defense-creating aspects of the personality. Its functions are to deal rationally with the requirements of reality, to adopt behaviour to the environment and to maintain harmony between the urges of the ID and the demands and aspirations of the superego. The Superego is the observer and evaluator of ego functioning, comparing it with an ideal standard - an ideal derived from standards of behaviour perceived over time, in parents, teachers and others significant. It provides the aspirational direction and demand for achievement within each personality. In the well adjusted person, behaviour simultaneously and successfully meets the demands of the ID, the Ego and the Super ego. On the other hand, the behaviour of the neurotic, the psychotic and the pathological personality with serious and repetitive social maladjustment may be considered to result from a disturbance in the dynamic checks and balances of these segments of the personality.

SPIRITUALITY (GOD)

—/12

SPIRITUALITY (GOD)

Date: 10/10/11
Ref: M.A.V.A.W - DDB/ME-1

Phone: 337-0924/668-1133

What the theorists have eliminated or neglected to include for understanding personality structure is a spiritual component. We all know how difficult relationships become because of strong religious beliefs. As a matter of fact, at a recent Fullbright conference, Ex. Bishop Elive Abdulah stated that religion is the biggest contributor to conflict in the world today. Therefore, neglecting this factor in personality development theory leaves out a most important consideration for understanding masculinity construction. This consideration is the superiority complex that men develop consciously or unconsciously by having the Ego and the Superego relate to a God in the male image. All the research points to a direct relation between Male God Imaging and power play in relationships that result in violent behaviour and abuse. My simple recommendation therefore, is that we lobby for a universal understanding and appreciation of the fact that God lives in all life and has no gender/sex. In man God has a masculine face. In woman God has a feminine face. Consequently, since it is the same God, we must fully accept the equality of the sexes, emphasizing that the principles of equity be applied providing for the differences in the sexes.

I Thank You In Nation Building

Donald Bermen

Management Coordinators:

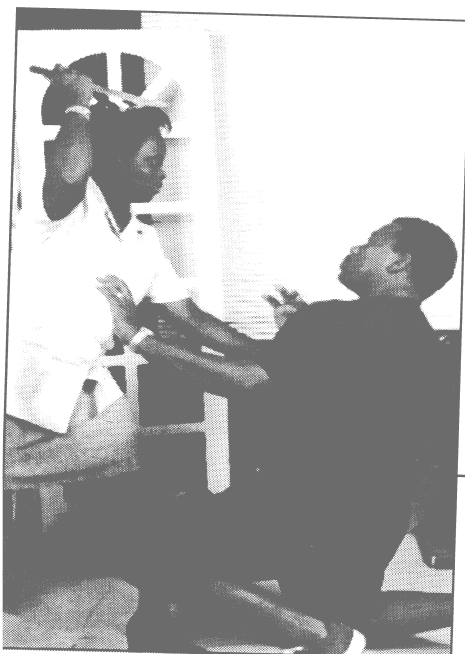
Donald Bermen

David Law

David Law

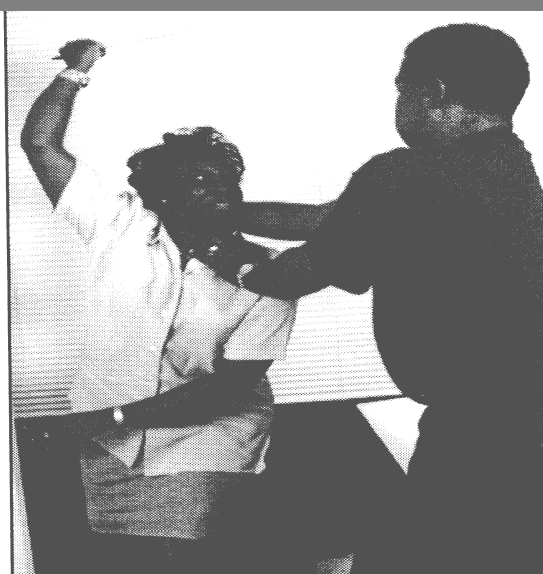
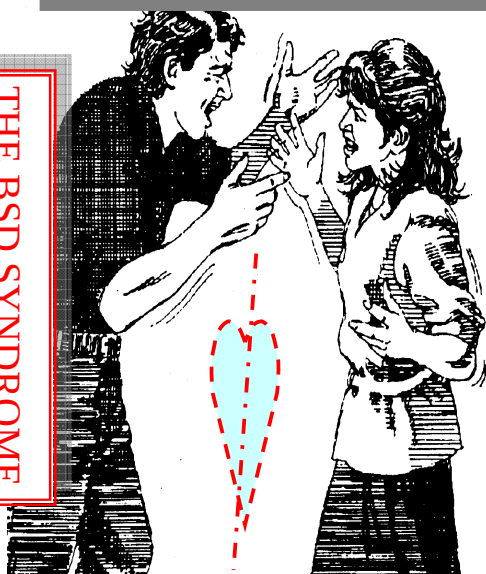
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DOMESTIC VIOLENCE AWARENESS HANDBOOK



LOVE AND LICKS DON'T MIX

THE BSD SYNDROME



REVISED WITH SECTION FOR VIEWS BY MEN TITLED "MAN TALK" 2005

A PUBLIC SERVICE OF MEN AGAINST VIOLENCE AGAINST WOMEN
Edited By Christopher Holder, Chairman MAVAW.
Assisted By Donald Berment, Secretary and Desmond Persad, Treasurer.

REPUBLIC OF TRINIDAD AND TOBAGO



M 1799(95)

Company No.

THE COMPANIES ACT, 1995

CERTIFICATE OF INCORPORATION

MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW)

Name of Company

I hereby certify that the above-mentioned Company, the Articles of Incorporation of which are attached, was incorporated under the Companies Act, 1995 of Trinidad and Tobago.



Angela
Registrar of Companies

19th August 1998

Date of Incorporation

Government Printery

3

CHARITABLE STATUS NO F (BUD): 7/4/205

Fiscal Year 1st July to 30th June.

B.I.R. No 1805479.

Bankers: Republic Bank Park Street, POS—Account No 160447571501



REPUBLIC OF TRINIDAD AND TOBAGO

Men Against Violence Against Women

No 45 River Estate Circular, River Estate, Diego Martin

Ph/Fax: (868) 637-0924—Website: <http://www.mavaw.com>



INTRODUCTION.

Dear Friends,

We are very pleased to provide you with this **“Domestic Violence Awareness Handbook—2002.”** The problem of domestic violence has been with us for as long as people have been living together. Thankfully, it has recently become an issue that is being addressed more vigorously on a local and national level. No person should be subject to physical or emotional abuse by someone they live with or have lived with. We hope this guide will explain the types of abuse that can take place and what you can do to stop it.

The printing and preparation of this **Handbook** is sponsored by the **Men Against Violence Against Women (MAVAW)**. While reading this guide you will find many advertisements from surrounding businesses. Without their support and donations this booklet would not have been possible.

The **Men Against Violence Against Women** would like to personally thank each and every sponsor who had the ability to contribute and those who did not but have supported us in their own generous way.

Sincerely,

Signed.....Christopher Holder, Chairman.

Men Against Violence Against Women

Management: Donald Berment, David Law, Johnny Bharath, Christopher Holder and Desmond Persad

Bankers: Republic Bank, Park Street. POS, Account Number 180447571501

PROMISES OF RESPONSIBLE ORDERLIES (P.O.R.O).

MEN AGAINST VIOLENCE AGAINST WOMEN

Chairman Email: christopherholder9@hotmail.com.

Signed.....

Secretary Email: mavawsec@yahoo.com.

Signed.....

Treasurer Email: desmond.Persad@hcltt.com.

Signed.....

Our next Text will be “Roots Of Societal Violence—Understanding The BSD Syndrome”



Men Against Violence Against Women

M.A.V.A.W.

Goals



- 1)** Inform MEN about our CONCEPT, which is, that the PRIMARY VIOLENCE being committed Against WOMEN is a PSYCHOLOGICAL One, in that MOST MEN have not Accepted WOMEN as EQUAL, Together with Appreciating Them as DIFFERENT.
- 2)** Provide in the First Instance, for EDUCATION and TRAINING of all our MEMBERS and Well Wishers and in the Second Instance, on Request.
- 3)** Locate, Identify and Register, All MEN in Solidarity with our CAUSE, both in CONCEPT and these GOALS, offering them participation in M.A.V.A.W., which is one of the PROACTIVE ways to take RESPONSIBILITY for MALE VIOLENCE and also which will CONTRIBUTE to CREATING a Violent Free Society.
- 4)** Conduct Research generally and Needs Analysis where possible, on the Incidence and Intensity of VIOLENCE IN RELATIONSHIPS, with an Emphasis on DOMESTIC VIOLENCE dedicating ourselves to Reducing and eventually Eliminating, Unacceptable Violence in Society, using a Multi-disciplinary approach, focusing on Correcting Behaviour Skill and Belief System Deficits.
- 5)** Initiate and/or Engage in Social Activism, in order to push Existing and Emerging Societal Problems with Violent Content, TOWARDS Gender Sensitive Social and Educational Solutions.
- 6)** Develop and Maintain, a NETWORK of Committed and Qualified Members and Friends, in order to Provide Both MEN and WOMEN, with Short Term and Long Term Assistance, Physically, Emotionally and Financially.
- 7)** Affiliate With and/or Work alongside, all other Non-Governmental Groups/Organisations, Civil Society and Governments, who share with us, this Common Goal of Reducing and Eventually Eliminating VIOLENT BEHAVIOUR, In and From our Society.
- 8)** Host when Possible and Attend when Invited, Public Meetings, Seminars, Symposiums, Workshops, Consultations, Conferences etc., both Locally and Internationally.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.
FIRST DIRECTORS—CHAIRMAN—CHRISTOPHER HOLDER --SECRETARY—DONALD BERMENT
TREASURER—DESMOND PERSAD.

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CHRISTOPHER HOLDER
Chairman



DESMOND PERSAD
Treasurer



DONALD BERMENT
Secretary

CHAIRMAN'S REMARKS.

Dear Citizens,

The following is the truth, the whole truth and nothing else but the truth!

- 1. An 8 year old daughter cries out in pain in the middle of the night beseeching her father "Daddy it's paining, stop hurting me, I can hardly breathe."*
- 2. A young mother of four lies on the pavement, bleeding profusely from a wound to her chest, gasping for breath she cries, "My husband stabbed me, please take the children by my mother."*
- 3. A ten year old girl is found lying in a pool of blood at the back of her home. She subsequently is pronounced dead on arrival at the hospital. The autopsy revealed that there were signs of sexual assault and death was due to shock and hemorrhage consistent with stab wounds to the back and neck.*

What an introduction to MAVAW's message to the citizens of our nation! Awareness of male predominated violence in our society is the primary objective of these opening statements. MAVAW's philosophy is that social order is created in the homogeneity or commonality of ideas that create beliefs, consciousness, feelings and aspirations.

Pursuant to this philosophical base, MAVAW is pleading to all the fathers, grandfathers, sons, grandsons, brothers, husbands, boyfriends, uncles and nephews to respond positively to our message.

MAVAW's Male Awareness questions to all males in Trinidad and Tobago are: -

"Do you directly or indirectly contribute to male dominated violence?" or

"Do you directly or indirectly take immediate action to eradicate violence against our women and children?"

Great sociological minds have collectively concluded that social problems are caused by both individuals and the established social system. Beholding this conclusion, MAVAW has examined the social and cultural institutions in our society that can influence our social behaviour. As such we have published this handbook that will convincingly open the eyes of our population to the following issues.

1. The sensitivity of gender issues.
2. The role and nature of parenthood.
3. Tips on stress management and conflict management.
4. Holistic Health.

DEFINITIONS

Holistic Health has transcended the boundary of physical, mental and social aspects and includes intellectual and spiritual.

MAVAW is desirous of unveiling whether the male dominated groups, organizations and institutions promote violence.

For example, the Police Service, Prison Service and Defence Force and to a lesser extent, the Fire Services are trained to be violent because of the nature of the required duties. In certain aspects the training modules involve excusable homicide because officers are trained to kill.

MAVAW is of the view that since 90% of the officers in these services are males, then there is a high probability that they may be prone to acts of violence.

Therefore, we are humbly asking the Chief Executive Officers of these respective protective services to look within their organizations and determine what level of male dominated violence comes from within their fold.

Similarly, we are challenging all other male dominated public services and public institutions, even the Parliament of Trinidad and Tobago to do some introspection on the issue of male dominated violence to determine the similar objective.

This awareness is also extended to the political parties, private groups and organizations, which are male, dominated.

For Male Awareness we are advocating that there should be persistent examination of male violent behaviour in our Society.

The genesis of the feminist movement brought forth two major issues over three decades ago. They are: -

1. Discrimination of housewives and housework and
2. Domestic Violence

Today, domestic violence is still deeply entrenched in the culture of our society; notwithstanding, housewives have gotten some considerable relief.

It is against this background that MAVAW feels that because of number of males committing domestic violence, there is dire need for a masculine perspective on this potential or imminent social disintegration, firstly of our society in Trinidad and Tobago, then our Caribbean region and the International community.

MAVAW proposes the question, "Can a masculine perspective unravel the root causes and any inherent gender deficiencies or biases in acts of sexual violence against any person committed by males?"

To further illuminate this consciousness, we have identified some long, medium and short term projects as follows:

1. The acquisition of a Transitional Home for men who have to be separated from the family unit.
2. Community seminars by our young and adult males on gender issues.
3. A gender sensitive calypso competition.

MAVAW intends to raise funds to finance the Transitional Home and this exercise will begin with the promotion of a car raffle.

MAVAW will utilize other creature methods to generate funds to achieve our objectives outlined. But, most importantly, MAVAW is looking forward for support from the community at large.

MAVAW is confident that once there is a concurrence of the social and cultural programmes and positive responses to our call, male dominated violence will be eradicated together with the growing incidence of feminine violence.

CHRISTOPHER HOLDER

Police Sgt. NO. 10089 B.Sc (Hons.) B.Sc. Criminology.



Generally the term domestic violence is used to refer specifically to abuse of a wife by a husband, mainly because this is the most prevalent type of abuse. In reality, domestic violence is concerned with the many types of abusive relationships that can exist in a domestic setting.

Prior to 1991 domestic violence offences were treated as part of other offences without differentiation as to its particular nature e.g. a man strikes his wife or vice versa, causing injury was classified as Assault and Battery or some related offence.

With the advent of The Domestic Violence Act No. 10 of 1991 all such crimes occurring between certain specified persons were being classified as domestic violence.

There has also been a steady increase in the reporting of such crimes as victims become more aware of their rights and counselling and intervention agencies become more active.

However, Act No. 10 of 1991 was replaced by Act No. 27 of 1999.

Definition Of Domestic Violence

Under the act, domestic violence includes physical, sexual, emotional, psychological, or financial abuse committed by a person against a spouse, child and any other person who is a member of the household or dependent.

PHYSICAL ABUSE

This means any act or omission which causes physical injury and includes the commission of or an attempt to commit any of the offences listed immediately below: -

Summary Offences Act, Chap. 11:02

- Assault and battery.
- Assault upon children, women and old, infirmed, sickly persons.
- Aggravated assaults causing wound or harm.
- Violent or obscene language or disturbance of the peace.
- Possession of weapons intended for crime.
- Throwing stones or other missiles.
- Inciting animals to attack.
- Misuse of telephone facilities and false telegrams.

Malicious Damage Act, Chap. 11:06

- Setting fire to a dwelling house, any person being therein.
- Conspiracy to set fire.
- Destroying or damaging a house with gunpowder, any person being therein.
- Attempting to destroy buildings with gunpowder.

Offences Against the Person Act, Chap. 11:08

- Conspiring or soliciting to commit murder.
- Attempted murder.
- Sending letters threatening to murder.
- Shooting or wounding with intent to do grievous bodily harm.
- Inflicting injury with or without weapon
- Attempting to choke, etc. in order to commit any indictable offence.
- Using drugs, etc., with intent to commit offence.
- Administering poison, etc. so as to endanger life or inflict grievous bodily harm.
- Administering poison, etc., with intent to injure or annoy.
- Exposing children so that life endangered
- Causing bodily injury by explosive substance.
- Use of explosive substance or other noxious thing with intent to do grievous bodily harm.
- Attempting to blow up buildings.
- Drivers of vehicles injuring person by furious driving.
- Procuring abortion.
- Procuring drugs to cause abortion.

Children Act, Chap. 46:01

- Punishment for cruelty to children and young persons.
- Suffocation of infants.
- Begging.
- Exposing children to risk of burning.
- Allowing children or young persons to be in brothels.
- Causing, encouraging or favouring seduction or prostitution of young girls.

Sexual Offences Act, 1986

- Rape.
- Sexual assault by a husband in certain circumstances.
- Sexual intercourse with a female under fourteen.
- Sexual intercourse with a female between fourteen and sixteen.
- Sexual intercourse with a male under sixteen.
- Incest.
- Sexual intercourse with adopted minor.
- Sexual intercourse with mentally subnormal person.
- Buggery.
- Serious indecency.
- Procuration.
- Procuring defilement of a person.
- Detention of a person.
- Abduction of a female.

SEXUAL ABUSE

This includes sexual contact of any kind that is coerced by force or threat of force and the commission of or an attempt to commit any of the offences aforementioned under the “Sexual Offences Act, 1986”. However, one must be aware of the Amendment Act o 31 of 2000.

EMOTIONAL OR PSYCHOLOGICAL ABUSE

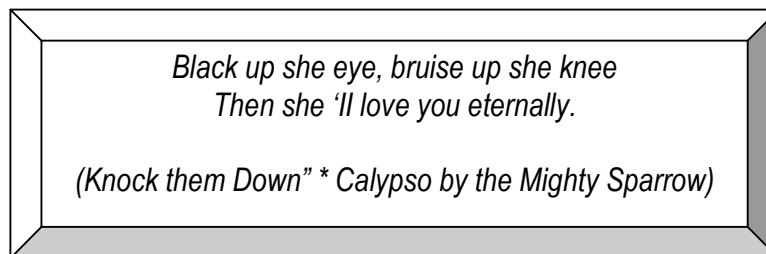
This means a pattern of behaviour of any kind, the purpose of which is to undermine the emotional or mental wellbeing of a person including:

- Persistent intimidation by the use of abusive or threatening language.
- Persistent following of the person from place to place.
- Depriving that person of the use of property.
- The watching or besetting of the place where the person resides, works, carries on business or happens to be.
- Interfering with or damaging the property of the person.
- The forced confinement of the person.
- Persistent telephoning of the person at the person’s place of residence or work.
- Making unwelcome and repeated or intimidatory contact with a child or elderly relative of the person.

FINANCIAL ABUSE

This means a pattern of behaviour of a kind, the purpose of which is to exercise control over, or exploit or limit a person’s access to financial resources so as to ensure financial dependence.

What Causes Domestic Violence?



There is no real answer to this question since motive may vary from individual to individual and in some cases apparent motive may even be absent. However, since over a larger percentage of all physical domestic violence acts are committed by men we need to note some of the established reasons why men do it.

1. The myth that women need and expect to be controlled and reminded that men are the bosses. Some men treat this myth as reality, hence the sentiments expressed in Sparrow’s calypso, noted in bevel above.
2. They believe that as the traditional head of the household it is their duty and responsibility to dispense discipline to everyone under their “control”, adults and children included.

3. The biblical story of Adam's rib, and the common law of conjugal rights have been used to reinforce the false belief that men are superior to women, and so the latter must surrender to their will.
4. Peer pressure leads some men to protect their ego by showing their strength lest they be called a "mamapool" (stupid) man.
5. They know that the police and other authorities are often reluctant to intervene in what they consider to be a private family matter.
6. They realise that they possess superior physical strength over women, children and the elderly and often take advantage of this.
7. Some men were themselves victims of abuse and violence, and studies have shown that such persons have a propensity to perpetuate this cycle of abuse.
8. Men often commit such acts whilst under the influence of alcoholic drinks or illegal drugs.
9. Insecurity, low self esteem, and poor communication skills all contribute to the problem because some men take their frustrations out on their partners and/or dependants.

Do Women engage In Domestic Violence?

Women commit acts of domestic violence for the same reasons as outlined in 7 - to 9 above. In other instances they retaliate to abuse received from men, or try to assert their own authority in the face of changing gender roles. The majority of their victims are children. The Domestic Violence Act was created to deal with abusers of either sex. However we will concentrate more on male generated violence in this Section of our Handbook.

In the Section: "Man Talk" of this Revised Edition of MAVAW's 2002 Domestic Violence Awareness Handbook, you will read the views from a variety of men working in the area of "Violence Reduction" based on their personal studies, experiences and conceptions on the issue of Domestic Violence.

How It Starts.

The 37 year old mother of five who was brutally stabbed and two of her children killed said that her attacker would not accept her decision to end their relationship. "I will kill you if you ever leave me" he told her.

In most cases of domestic violence, a man starts off using verbal taunts and emotional abuse to hurt his mate. His goal is to dominate and control her. He wants her to obey him. He wants to convince her that she is dependent on him. In most cases the violence comes later, after the woman has been worn down by psychological abuse.

Some of the methods an abusive male used to dominate and control his mate are listed below:

- **ISOLATION**

Abuse only thrives if it is kept secret. To isolate his mate from other people, an abusive man will prevent his mate from seeing her friends, or yell at her when she talks on the phone. He will rationalize his actions by telling her he loves her so much he wants to be with her twenty-four hours a day.

- **JEALOUSY**

Overly suspicious and insecure, an abusive male will demand to know where his mate is at all times; he will not believe her when she tells him where she is going, and follow her. He will open her mail, eavesdrop on her phone calls, or constantly accuse her of having an affair.

- **CRITICISM**

An abusive male will do what he can to belittle and demean his mate. He might tell her she is no good, "and I don't know how I got stuck with you," or tell her she is ugly, stupid, fat or frigid. He might try to make her feel worthless by insulting her in front of her family, friends, and co-workers. He will do what he can to undermine her self-esteem.

- **DEMANDS**

An abusive male will make demands that are impossible for his mate to keep. Even if she meets them, he will tell her she has failed. He might always expect her to look a certain way, and to keep a spotless house. In most cases, he will resent any changes she makes, especially if she does not consult him first.

- **RULES**

To control his mate, an abusive male will make up a strict set of rules that she must obey. She may be forced to turn over her pay cheque to him and has to ask him anytime she wants to buy something. He might set a curfew for her, or not let her leave the house without him. He will try to convince her he has the right to punish her if she disobeys these rules.

- **THREATS**

An abusive male will try to intimidate, threaten, and harass his mate into obeying him. He might intimidate her by yelling at her and throwing objects across the room; he might threaten to hurt her, or her children, if she disobeys him. The threats probably will get more severe with time; after a while, he might tell her he will kill her if she ever leaves him.

The Cycle Of Violence.

Wife killer faces the Hangman". The court heard that the accused stabbed his wife in the presence of an off-duty policeman. When arrested the accused said "I don't care if you kill me because I make up my mind to kill she."
- The Guardian. 12/3/96

It may take months of verbal bullying and emotional abuse to turn into physical violence, or it may take days. Similarly, an assault can take five minutes or as long as an hour; it can happen every day, or only once a year. In almost all abusive relationships, however, the violence gets increasingly worse, until the woman is seriously injured. In fact, if she waits too long to get help or leave the relationship, she might be killed.

Most abusive relationships follow similar patterns. In almost all cases the man will refuse to take responsibility for his actions. He probably will blame his mate for the abuse, saying, "It's all your fault, 'You're a nag', 'You drove me to it,'" or, "You deserved it, "You didn't do what I told you." In other instances he might blame stress, family problems, alcohol, or drugs, for the abuse, but he will not consider himself an abusive male.

Although some relationships deteriorate once the abuse starts, others go through cycles of good and bad days, of violence and forgiveness. The three stages of the cycle are: -

1. TENSION

In this stage, the woman and man both realize the abuse will start again, but neither knows when. The man becomes increasingly irritable and angry, and the woman becomes frightened. She will do all she can to try to appease him even though she knows her efforts will be unsuccessful. The man feels overwhelmed with life's pressures and his own feelings of inadequacy. He might start to drink a lot or use drugs. He will not ask for help or discuss his problems. Instead, he will turn his frustrations on to his mate. He will expect more and more from her; nothing she does will be right. He will begin to scream and shout at her, throw objects or slam doors, but he will not feel a sense of release, and may therefore progress to physical assault on his mate.

2. VIOLENCE

During this "battering" stage, the man explodes and turns all his fury onto his mate. He will physically attack her; he might slap, push, hit, punch, choke, beat, shove, restrain or rape her. He might throw her down the stairs, bash her head into the wall, or try to strangle her. Violence helps him to feel powerful and in control. If she tries to resist or reason with him, he will get even angrier. He might strike her harder, fracturing her skull or breaking her nose. In most cases, he will beat her until he exhausts all his frustration and rage. This cycle will be repeated over and over again.

3. REMORSE

Also called the "honeymoon phase," this stage of the battering cycle centers around a man's attempt to win back his mate. He might apologize and seek her forgiveness, or try to charm her. He might promise to get help, or tell her he will change. In most cases, he will try to rekindle her hope by showing her just how good the relationship can be. In many cases, she will believe him and stay with him, and the cycle of violence will begin anew.

The Victims.

Marital Violence also has a detrimental effect on children. Every day hundreds of children are subjected to extreme physical violence that can seriously maim or kill them.

Many people falsely believe that domestic violence is “only a lower-class problem”. In fact, there is no “typical victim”; any woman can be battered by her mate. Domestic violence cuts across all races, ages, and economic backgrounds. It affects wealthy professional women as well as the poor and unemployed; it’s just that wealthy women are less likely to report the abuse to the authorities.

Some experts estimate that 50% of women in heterosexual relationships are victims of domestic violence, i.e. single, married and divorced women. In fact, domestic violence is a pervasive social problem that causes more injuries to women than muggings, rapes or car accidents altogether.

Why People Stay In Abusive Relationships.

Women bashed to death — Man on the run. A friend of the deceased said that several complaints had been made to the police about the man’s continued abuse, but was told that the man would have to attack her before they could arrest him.

1. Emotional or economic dependence on the abuser. This is particularly so in the case of women and children.
2. FEAR: Afraid that the abuser will commit some bodily harm to, or damage the property of the victim, or the victim’s children if the victim leave or complains.
3. RELIGION: Some religions frown upon divorce or the break up of the family system. “Till death do us part”, becomes a reality.
4. FAMILY PRESSURE: Some victims have little or no family support if they are being abused. Marital vows become more important than physical or mental abuse.
5. HOPE: Many abused women continue to love their mates. A battered woman might stay with her mate because she pities him, and knows he has a problem, or she might continue to hope that he will stop being abusive. In many cases, abused women do not want the relationship to end; they just want their mate to get help. They only want the abuse to end.
6. LACK OF OPTIONS: Many women would leave if they could. They may feel trapped, as though they have nowhere to go, no one to help them. They may not be aware of their legal rights or options, or they may have heard that the police will not assist them if they call for help. Brainwashed by their mates, they may not believe they could survive on their own if they did leave.
7. SHAME: Battered women often are embarrassed to be in an abusive relationship. They do not want their friends and family to know that their “storybook marriage”, is less than ideal, that their “Prince Charming” is badly flawed. Aware that their relationship is “not the way it is supposed to be”, they try to deny the abuse, both from themselves and from the rest of the world.

If You Are Abused, Before/After-the Attack: - Before The Attack!

If you are abused, you must reach out and talk to someone to break the secrecy and isolation that shrouds the abuse. You must get help. Remind yourself you are not to blame for the abuse. Nobody deserves to be beaten. Spousal abuse is a crime.

If you think an attack is imminent, consider leaving, at least temporarily. Ask a relative or friend if you can stay with them, or call a shelter. (Even if you do not want to stay in a shelter, staff can provide you with invaluable support and advice). In cases where it is difficult for you to leave without arousing suspicion, make up a daily ritual that will enable you to escape quickly.

For instances, make it a habit to take out the garbage late at night, or to go for walks at odd hours. Prepare for an emergency situation by hiding a spare set of car keys, or saving extra money for bus or cab fare. Leave a change of clothes at a friend's house, or rent a safe-deposit box at a local post office. Go to the local police station after you leave, and ask a police officer to accompany you back to your residence, to get the children and your belongings.

Remember

Your children also are in danger if you leave them behind. In fact, in some cases, if you do not take your children with you when you leave, you might be later accused of abandoning them.

When you sense an oncoming attack, and you cannot escape, do what you can to protect yourself from injury. Stand near a door or window, somewhere providing easy access to the outside, or near a door that can be locked from the inside. Try to protect your face, chest, and abdomen from assault. Do not reason with him, or try to retaliate. In most cases, it will just get him angrier. Do what you can to save yourself.

If you can, call the police. Even if you do not want to file a criminal complaint against your mate, you can ask the police to provide temporary protection. If the attack is serious, the police usually can make an arrest; they also can take you to a shelter, or for medical treatment, and provide you with helpful information on your legal rights and options.

After The Attack!

In one case the woman was struck with a boulder, and as she fell unconscious, the man forced open her mouth and poured gramoxone down her throat. He then drank the remainder of the contents of the bottle. Both died subsequently.

If you are injured, seek medical treatment immediately and ask the attending physician to document your injuries by taking photographs. They can be used as evidence if you later

choose to seek court protection, or file criminal charges. Save torn and bloodied clothing, broken or damaged objects - anything that can serve as evidence of abuse.

In most cases, you will have to be the one to initiate action if you want the abuse to stop. Remind yourself that domestic violence is a crime, which you do not deserve to happen to you and do not have to tolerate it.

Call a shelter or domestic crisis centre for advice and support. Even if you do not want to leave home at this time, you can ask a counsellor about your options. Shelters also provide a wide array of services, including medical and legal services, child care, counselling, and employment. Contacting a shelter can help you to regain control of your life.

How The Act Works.

*According to domestic violence statistics since the inception of the Domestic Violence Act, on April 30, 1994 some 8,297 applications for protection orders against violent spouses had been filed.
- Newsday, 8/19/96*

PROTECTION ORDER

The following persons may apply for a Protection Order: -

1. A spouse or former spouse, a cohabitant or former cohabitant.
2. A person who habitually resides in the same dwelling house as the applicant or respondent and is related to the applicant or respondent by blood, marriage or adoption.
3. A child - a person under the age of eighteen years who ordinarily or periodically resides with the applicant, whether or not the child is a child of the applicant and the respondent or either of them, and includes an adopted child, stepchild, or a child who is treated as a child of the family but not a person who is/has been married.
4. A dependent - a person over the age of eighteen years who by reason of physical or mental disability, age or infirmity is reliant on either the applicant or respondent for his welfare.
5. A parent - a person who is a parent or grandparent in relation to a child, dependent, spouse or respondent as the case may be:
 - (a) By blood;
 - (b) By marriage;
 - (c) By adoption; or
 - (d) Within the meaning of the Family Law (Guardianship of Minors, Domicile and Maintenance) Act.

6. A sibling by blood or affinity of either the spouse or respondent, not being a member of the household.
7. A person who has a child in common with the respondent.
8. A person who is or has been in a visiting relationship with a person of the opposite sex for a period exceeding twelve months.
9. A person with whom the child or dependant normally resides or resides with on a regular basis or any adult member of his household.
10. A police officer.
11. A probation officer.
12. A person experienced or qualified in social welfare and approved by the Ministry of Legal Affairs.

The application must be made by going to the Clerk of the Magistrate's Court for the district where the alleged abuse took place and filling out a form 1 application.

A hearing is then set no more than 7 days from the date of application.

The respondent (alleged abuser) must be served with a copy of the application and summoned to appear in court on the date of the hearing. Most applicants will have a lawyer to represent them and evidence from witnesses and medical records (if available) will be collected for presentation in court.

At the hearing the applicant will present evidence of domestic violence and once the Magistrate is satisfied on a balance of probabilities (civil standard) that the respondent has: -

1. Engaged in or threatens to engage in Domestic Violence acts and unless restrained will engage in such acts.
2. Engaged in conduct of an offensive or harassing nature to the victim and the complainant is fearful of physical or mental injury to the victim.

Then the court shall issue a Protection Order restraining the respondent from engaging in such conduct. This order may also order: -

1. That the abuser stays out of the home even if it belongs to him/her.
2. Prohibit him/her from going to the victim's home or workplace or speaking or sending messages to the victim.
3. Order him/her to provide reasonable care and maintenance for a child or dependent.

4. Direct him/her to return property of the victim which is in his/her possession, or prevent him/her from taking possession of specified personal property which is reasonably used by the victim.
5. Direct the applicant or respondent to seek appropriate counselling or therapy from an approved person or agency.
6. Specify conditions subject to which the respondent may be on premises or in a locality which the victim frequents.
7. Prohibit him/her from causing another person to do any of the things which he/she is directly prohibited from doing.
8. Relinquish to the police any firearm licence, firearm or other weapon which he/she may have in his/her possession or control and which may or may not have been used during the incident.

A PROTECTION ORDER remains in force for any period specified by the court, but such period shall not exceed 3 years. When an application for a Protection Order is made the following can be granted or obtained: =

1. **INTERIM PROTECTION ORDER:** The court may also issue an interim protection order pending the determination of the application. This procedure recognizes the fact that it is not always possible to complete the matter on the first hearing and it may be necessary to ensure the safety of the applicant. It will usually prohibit the respondent from engaging in any of the conduct complained of in the application.
2. **THE UNDERTAKING:** The court may also exact a signed undertaking from the respondent to refrain from engaging in conduct of the nature specified in the application and in conduct that would constitute a domestic violence offence. It may contain the same conditions as a protection order and carries similar weight.

DEALING WITH THE ORDER

A copy shall be served:-

1. Personally on the respondent.
2. By registered post to the last known address of the respondent.
3. Leaving the document at the last known address of the respondent.
4. By advertisement in two daily newspapers which service is deemed to have been effected at midnight on the date of the later advertisement, the cost to be borne by the applicant.
5. Any other person whom the order is to apply whether or not the person is a party to the proceedings.
6. The police officer in charge of the station located nearest to the area where the respondent or applicant resides.

Guidelines for Police Officers in Dealing with Domestic Violence.

Quick and decisive action by the police can often avert a potential disaster. They must be prepared to put aside their feelings and prejudices and to act in a professional manner to minimize the extent of domestic violence. Even though some victims are reluctant to press charges against the perpetrator, this is no excuse for police officers failing/refusing to carry out their sworn duty to protect and serve. Failure to take appropriate action is a neglect of duty punishable by disciplinary action.

WHEN A REPORT COMES

1. REPORT OF THREATS:

- Record the report in the station diary.
- Interview and warn the person against whom the report is made.
- Record in the station diary the action taken with respect to the report.

NOTE: If the report amounts to an offer or threat to do immediate violence to the victim this is an assault which is punishable by law.

It is an offence for a person to use obscene, indecent or profane language to any resident or person in any place to which the public is granted access. Using insulting, annoying, or violent language to another with intent to, or which might tend to, provoke such person to commit a breach of the peace is also a crime.

If a subscriber permits his telephone to be used for making profane, obscene or abusive language or does nothing to stop its use for such purpose after being given reasonable notice, of such acts or makes or permits annoying calls to be made to another subscriber, then the telephone company has the power to suspend and if the problem is not corrected, to permanently disconnect the service to the offender.

Caller I.D. might assist in identifying offensive calls.

2. REPORT OF VIOLENCE RESULTING IN PHYSICAL INJURY:

- Record the report in the station diary and then dispatch or take the victim to seek medical attention.
- A female officer must accompany a female complainant for treatment unless circumstances make this difficult.
- If necessary a female victim should be accompanied to a safe house.
- The report must be investigated and the medical report assessed to determine the appropriate action to be taken.
- Advise the victim of the procedure to obtain a protection order.
- Refer the report to the relevant section of the Police Service for monitoring.

3. REPORT OF SEIZURE OR DESTRUCTION OF PROPERTY:

- Record the report in the station diary.
- Investigate and determine whether a crime has been committed and take the appropriate action.

In all of the above cases it is advisable to take a written statement from the victim. If the victim refuses to consent to criminal action being taken this fact must be recorded and the victim advised of civil remedies or to seek the advice of an attorney.

If the perpetrator is a police officer then the complaint should also be referred to the Police Complaints Division for action by them.

Police Powers and Duties under the Act.

Generally police officers have the power to arrest without warrant any person who commits any breach of the peace or offence in their presence (traffic offences are debatable). In addition, when a breach of the peace or an offence is committed in their absence, the power to arrest without a warrant for any **arrestable offence** is granted under the Criminal Law Act, Chap. 10:04. **Non-arrestable offences** committed in their absence do not give police officers such power to arrest without warrant, except in cases of "aggravated assault" (an assault against the person of children, women, old infirmed persons or handicaps, etc.).

In addition to his other powers of arrest, a police officer under the Domestic Violence Act has the following powers and duties: -

1. A police officer must respond to every complaint or report of domestic violence.
2. A police officer responding to a domestic violence report must complete a domestic violence report which shall form part of a National Domestic Violence Register to be maintained by the Commissioner of Police.
3. A police officer, under the Criminal Law Act, can enter premises without a warrant (having been refused permission to enter the premises) for the purpose of giving assistance to a person reasonably suspected to have suffered or is in imminent danger of physical injury at the hands of another person in a situation amounting to domestic violence.
4. Where a police officer exercises the power of entry (3) he must immediately submit a written report to the Commissioner of Police.
5. A police officer who has been refused permission referred to in (3) above, can also obtain a warrant from a Magistrate authorising him to enter the premises specified in the warrant at any time within twenty-four hours after the issue of the warrant.
6. Where a police officer has entered on to premises he must:
 - Give assistance to a person, who has suffered injury,
 - ensure the welfare and safety of a child who may be on the premises, and
 - prevent any further breach of the law.
7. Where an Order is in force and a police officer believes on reasonable grounds that a person has committed or is committing a breach of the Order, he may detain and arrest that person without a warrant.

Some Places to Seek Help.

THE SHELTER FOR BATTERED WOMEN 40 Woodford Street, Newton Port of Spain	622-7273 or 622-RAPE
THE HALFWAY HOUSE Anand Circular Drive, Harmony Hall, Gasparillo	650-2684
NATIONAL FAMILY SERVICES Anchorage House, Independence Square, Port of Spain	
THE LEGAL AID CLINIC Hugh Wooding Law School, Gordon Street St. Augustine	662-5835
THE LEGAL AID AND ADVISORY AUTHORITY Oxford & Edward Street, Port of Spain	625-0454
TRINIDAD AND TOBAGO RAPE CRISIS SOCIETY	622-7273
COMMUNITY POLICING SECTION Police Headquarters, Edwards & Sackville Street Port of Spain	623-0744
WOMEN'S RESOURCE AND RESEARCH CENTRE Charford Court, Charlotte Street, Port of Spain	
TOWERS SHELTER FOR WOMEN Mt. Grace, Tobago	
MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW) Contact Donald Berment	637-0924
SAMMAN SHELTER 1 7A Lady Chancellor Hill, Port of Spain	628-4218
FAMILIES IN ACTION 82 Maraval Road, Port of Spain	628-2333 or 622-6952
HARMONY HALL HALFWAY HOUSE Anand Circular Drive Gasparillo	650-2684
A LADY BY THE WAYSIDE 1 Mt. Hololo Road, Mt. Hololo, Cascade	624-7084
HOPE CENTRE HOME FOR NEGLECTED AND ABUSED CHILDREN Pointe-a-Pierre Road, San Fernando 657-9630	

Domestic Violence and Human Rights

This topic is massive and as such I must put it into some perspective in order to gain some insight into psychological and physical abuse in domestic settings for which the right to life frequently becomes lost.

MAVAW'S - MEN AGAINST VIOLENCE AGAINST WOMEN approach to this debate centers around the predominance of the male homo sapien inflicted violence and the apparent infection of the "domestic violence disease."

What are some of the sources of this universally undesirable behaviour?

Human rights have been declared and have been pronounced by legal luminaries as "inalienable rights" which preceded any constitution on the globe. As a matter of fact, Section 4 of the Constitution of Trinidad and Tobago in recognition of these fundamental god given human rights unequivocally, has enshrined in it these natural rights and freedoms.

Just to mention a few for example: -

1. *The right of the individual to life, liberty, security of the persons and enjoyment of property and the right not to be deprived thereof except by due process of law;*
2. *Freedom of conscience and religious belief and observance;*
3. *Freedom of thought and expression;*
4. *Freedom of movement.*

Therefore, one can envision that each homo sapien should be allowed to develop as the individual designed by the creator to embrace all natural human characteristics and free of any form of "social dysfunction.

" Domestic violence is one form of "social dysfunction."



What is Domestic Violence?

Most often, Domestic Violence is used to refer specifically to psychological and physical abuse of a wife by a husband, mainly because this is the more recorded/noticed type of abuse. In reality, domestic violence is concerned with the many types of abusive relationships than can exist in a domestic milieu (setting), by both males and females.

DOMESTIC VIOLENCE in Accordance with the Laws of Trinidad and Tobago is as follows: Act 27 of 1999 describes it as the physical, sexual, emotional or psychological or financial abuse committed by a person against a spouse, child and other person who is a member of the household or dependent.”

Here are some examples of psychological and emotional abuse, financial abuse, sexual abuse, and physical abuse, which can happen to spouses, children and dependents.

PSYCHOLOGICAL ABUSE

- Criticize or call your partner names
- Force spouse to do housework to your standards
- Make spouse out to be stupid or crazy
- Treat spouse as a servant; act like the boss
- Ignore, 'blank', or refuse to listen to spouse
- Threaten to involve immigration
- Lie or deny what you have done
- Prevent spouse's contact with friends or family
- "Look at" other persons; threaten affairs
- Not let spouse go where/when spouse wants
- Sulk or withhold attention or support
- Make spouse account for every minute spent
- Listen to phone calls or open spouse's mail
- Manipulate the children to take sides
- Pound your fists or punch the wall
- Harass spouse by spying; stalking; checking up
- Threaten to harm other family members
- Threaten with weapon or object
- Not leave when asked
- Prevent spouse from leaving
- Threaten to commit suicide
- Deprive spouse of food or sleep
- Rip spouse clothes
- Swear, shout/scream in their face
- Use aggressive looks or gestures
- Tell spouse to leave
- Accuse spouse of having affairs
- Not keep to your agreements
- Twist spouse words
- Tell spouse what to wear
- Make fun of or humiliate spouse
- Interrupt or not let spouse speak
- Blame or make spouse feel guilty
- Make spouse do degrading things
- Throw food or objects around
- Smash up possessions
- Threaten to hurt spouse
- Drive fast or recklessly
- Stand over spouse
- Threaten to kill spouse

FINANCIAL ABUSE

- You decide how the family income will be spent
- Make your partner ask or beg for money
- Make spouse account for every penny spent
- Leave spouse house-bound with all the child-care
- Sabotage spouse paid work
- Withhold money
- Be secretive about money
- Put spouse on an 'allowance'

SEXUAL ABUSE

- Get angry if you don't have sex
- Touch spouse sexually when spouse doesn't want
- Use pressure or threaten to obtain sex
- Make spouse perform sexual acts forcibly
- Physically attack sexual parts of spouse's body
- Forced use of pornography
- Make fun of spouse sexually
- Treat spouse like a sex object
- Forced prostitution
- Force spouse to have sex

PHYSICAL VIOLENCE

- Cut or slash with knife
- Push, pull or trip her
- Throw things at her
- Pin her to a wall or floor
- Violence to family/friends
- Smother her mouth
- Hold her under water
- Violence to children
- Choke or strangle her
- Bite, pinch or squeeze her
- Throw her around
- Violent sex/rape
- Sit or stand on her
- Poke or prod with finger
- Hold, grab or shake her
- Twist her arm or leg
- Slap, hit or spank her
- Use weapon/object against her
- Tie or lock her up
- Punch with fist
- Pull her hair
- Head-butt her
- Violence to pets
- Spit at her
- Kick or knee her
- Burn or scald her

Please examine your behaviour in domestic relationships and reflect on whether any of or some of the abuses delineated above have been or is being committed by you. If this is so there is an urgent need to understand why this is happening.

MAVAW - MEN AGAINST VIOLENCE AGAINST WOMEN in its search for a solution to the male dominated domestic violence researched some male centered studies.

These are: -

1. *Acquisition of Gender Roles* by two renowned researchers in Psychology, Roger Davies and Peter Houghton;
2. *Silent Sons* by Robert J Ackerman; and
3. *The Human Male, a Men's Liberation Draft Policy* by Harvey Jackins

First let us examine ***The Acquisition of Gender Roles*** –

Roger Davies and Peter Houghton contended that a person's gender is determined biologically by the combination of sex chromosomes present in the cells of the offspring. Genetically a female has two (X) chromosomes while a male has one (X) and one (Y). In sexual reproduction the mother contributes one of her two (X's) to the offspring and the father either his single (X) or his single (Y). Thus, it is the father's contribution that determines whether the child is a male or female.

However, they submitted that although the sex of the offspring is determined by chromosomal and hormonal factors; the way in which individuals behave with respect to masculinity or femininity is very much influenced by the society and culture in which they

are nurtured. Studies suggest that sex roles are learned and that within any society or culture there exist rigid stereotyped ideas governing appropriate behaviour that may also change overtime within a culture, as what was considered appropriate masculine and feminine behaviour a few decades ago no longer applies, or at least not to the same extent.

TABLE AA SEX-ROLE STEREOTYPE IN WESTERN SOCIETY

<i>Masculine</i>	<i>Feminine</i>
Aggressive Dominant (Independent) Strong Competitive Ambitious	Non-Aggressive Submissive (Dependent) Weak Non-Competitive Un-Ambitious

It is against this background that the studies on **“Silent Sons”** should be viewed. It is argued that this study is for and about men who search for holistic health as men. It is about men who experienced pain as boys growing up in dysfunctional families and survived it. They appear to be fine but they carry their pain around quietly wherever they go. **These men are called “Silent Sons”**. They deny that they were negatively affected by the experience and continue to have problems in their lives.

They might come from a family that coped with violence, alcoholism, compulsive gambling, child abuse, verbal abuse, workaholism, divorce, extreme rigidity, or a variety of other problems.

The problems that they have in their lives today could include: -

- an inability to maintain relationships,
- an inability to control anger,
- A tendency towards workaholism or addiction, fear of intimacy, violent behaviour, or low self-esteem to name a few.

Some of the dominant characteristics of a “Silent son” are: -

1. He keeps things that bother him to himself
2. He denies that unpleasant events occurs
3. He fears letting people know him
4. He has difficulty interacting with his parents, spouse or children
5. He has a strong fear of criticism
6. He is angry
 - He cannot express his feelings
 - He disproportionately fears failure
 - He is obsessively driven to succeed
 - He desperately wants his life to be better, but doesn't know how to change.

Limited expression is the most significant of all the indicators of silence. The most often “Male bashing” statement heard is that “Men don’t have emotions.” In his opinion, the problem is that most men don’t express their emotions and as such they suffer from **stress reflected disease - heart attacks, stomach problems and addictions.**

This study by Robert J Ackerman involved a nationwide analysis of men, conducted over the course of two (2) years in the USA. It included research data and extensive interviews with more than 400 men from thirty eight (38) states, approximately 300 of whom came from dysfunctional families.

Those interviews were intensive and revealed the feelings, emotions and insights that data alone could never impart.

Robert J Ackerman also interviewed over 100 women, each of whom is or was in a relationship with a Silent Son, either as a mother, spouse, lover, sibling or friend. This was a deliberate method applied by Ackerman in order that men hear what women really say about them.

According to Ackerman everyone thinks they understand what men are supposed to be, but few, including men themselves, really understand who men are.

Complementing this study is the **Men’s Liberation Draft Policy**. This “Men’s Liberation Policy Statement” was drafted in 1998 through the cooperative efforts of many Co-Counsellors.

A first draft by Harvey Jackins was posted on the “Community” and “Men’s e-mail discussions” lists to several hundred Co-Counsellors for consideration and comments. Many comments were received and incorporated into a second draft.

Twenty-two men’s leaders were then called to a meeting where they worked in small groups discussing and expanding the document for several days. Therefore, a small group of editors finalized the statement which will soon be made available in a pamphlet, “The Human Male.”

However, this liberation policy was ushered in by persons in the Re-evaluation Counselling CRC) movement who realized that not only are men mistreated as all people in the society are, but that men are also specifically oppressed as men.

The RC movement is of the view that there has been no comprehensive programs for the liberation of men and the draft policy document will serve as a basis for widespread discussions of the world-wide situation for men; an introduction to men of the processes of discharge and reevaluation, and a framework for a men’s liberation movement.

Two (2) major issues have surfaced. They are: -

- (1) *Societal and institutionalized oppression and*
- (2) *Internalized oppression.*

Before we venture into the two (2) major issues certain concepts must be illuminated. These are follows: -

1. **OPPRESSION:** Refers to the interference with the freedom of an individual by other individuals or groups or societies (usually ultimately motivated by greed) through interference with the free will of one person or groups of persons for the advantage of another person or groups of persons. Oppression is the basis for the functioning of class societies.

2. **LIBERATION:** Refers to the program and process of freeing one's self and one's group from oppression.

3. **DISCHARGE:** Is a term used to collectively describe the various complex processes which accompany the release of tension from distress recordings of hurtful experiences; like memories of physical pain, discomfort, or emotional distress.

These releasing processes are dependably indicated by the physical manifestations of yawning, stretching, or scratching, sobbing, crying, shedding tears, shaking, trembling, perspiration from a cold skin, perspiration from a warm skin; laughter, shouting, violent physical activity (stamping, pounding); interested talking, relaxed talking, (reluctant, bored talking (particularly when accompanied by yawns) and "eager," excited recounting of experiences

4. **RE-EVALUATION:** Refers to the process, which occurs spontaneously after discharge, through which distress recordings are understood and turned into usable information.

5. **INTELLIGENCE:** As used here refers to the ability to create a new, successful, creative response to fit each new, present situation.

6. **DISTRESS PATTERNS:** Refers to a rigid set of "thoughts", behaviours, and feelings that is left by an undischarged experience (or experiences) of distress.

7. **CLASS SOCIETIES:** Refer to the structuring of society where one group of people oppress (exploit) another and has greater access to the resources of that society for the rationalized argument of better organization for production. There are three kinds of class societies: -

- Slave societies,
- Feudal societies and
- Capitalist societies.

8. **DISTRESS RECORDINGS:** Refers to all the information (sights, smell, voice, tones, gestures, posture, feelings etc.) that gets bound together in an unusable glob during the Distress experience and then is played over and over (like a record) in an inappropriate response to a new situation.

9. **CONDITIONING:** Is the psychological term for interrupting the free thinking of an individual or individuals by imposing a pattern which leaves the individual inhibited from acting on their own thinking but under pressure to succumb to the demands of other individuals.

10. **CONTRADICT:** Usually refers to “contradicting distress,” meaning helping the client to see that the distress recording is not present-time reality.

11. **OPPRESSOR ROLE:** Refers to the role of agreeing to carry out oppression. The person in the oppressor role has always been oppressed first. No one is able to assume the oppressor role without they having been extremely mistreated themselves first.

12. **COUNSELLING:** Refers to Re-evaluation Counselling a “well-defined-by-now practice” of listening and taking turns listening and allowing and assisting “discharge”, which has the effect upon participants of becoming intelligent where they had previously been confused.

What Is Societal and Institutionalized Oppression?

This first issue explains that the male specie of human beings has not been able to deal with the fact that we function in two completely different modes.

In the first mode we rely on the use of our flexibility where continual use of intelligence is suppressed and interrupted by an accumulation of distress patterns resulting from individual hurt experiences.

This pre-intelligent mode has led to the development of class societies and other oppressive mechanisms, which in turn enforce, maintain and support unintelligent rigidities on each new generation of humans.

The study emphasized that all groups of humans in our present societies are conditioned against the discharge and re-evaluation process, but the conditioning falls with special intensity upon males with the result that men are particularly set up as agents for the continuation of class societies and of all oppressions.

For example, the conditionings which have been upon men such as “big boys don’t cry, “don’t be a scaredy cat, “be a man,” it’s a man’s job to die for his country,” begin in the very first movements and days of their lives.

These patterns begin to ruin the lives of males immediately, but also set them up to intelligently accept and perpetrate the oppression of all people. In most societies, the process of growing from boyhood to manhood is beset by a deliberate discouragement and suppression of men’s abilities to feel their own emotions and discharge the distressed ones.

Fear, grief, loneliness, and uncertainty are often covered over with pretence of “confidence.”

For many men, the isolation that results from early violence to them, threats of violence and harsh expectations of “what it is to be a man” leaves them literally unable to recognize, admit and feel their feelings.

This conditioning is one of the elements that forces men to play the inhuman roles they are expected to play in society; be it in relation to women, to themselves to children, or to society as a whole. (This is because undischarged distress creates a compulsion to replay the original hurt sometimes in the victim role as in the original incident, but often in the perpetrator role).

For all men to recover the ability and freedom to “feel their feelings” and not only “feel” but discharge their distress feelings and so recover their intelligence, is the recommended key survival process that needs support from all men, and from all humans (male and female).

HUMAN RIGHTS TO DEVELOP NATURALLY—(The Opinion Shared By MAVAW Men)

Men, like all human beings (homo sapien) are inherently good caring, gentle and warm.

Their excellent real nature is obscured and distorted by the heavy conditioning society puts upon them, but remains undamaged and recoverable.

Their inherent attitude as men is to oppose and prevent any enforced inequalities with regard to life, liberty, and the pursuit of happiness, and to support all efforts towards liberation from oppression.

When boys act violently, it must never be assumed that “all is normal.”

Boys are never violent or aggressive except as a result of having been brutalized.

Some other mistaken notions widespread in present cultures, are that boys don’t need to be held and nurtured in the same way girls do, or that there’s a goodness and innocence present in women that is absent in men, or that it’s good for boys to hurt and suffer the hurts alone in order to ‘harden’ themselves in preparation for manhood.

Some others are that men don’t feel pain as much as women do, or that men are inherently compulsive sexually. None of these are true, and all need to be exposed and eliminated.

What Is Internalized Oppression?

The second issue recognizes the fact that one of the results of the external, institutional oppression is the creation of distress recordings.

This means that the person who has been oppressed carries around recordings of feeling oppressed which, when re-stimulated, act upon him or her to produce feelings as if fresh oppression was coming from outside, even though no new oppression is taking place.

This is “internalized oppression,” and it operates so as to have the man believe the negative stereotypes of men.

Past invalidations seem to be still true to the victim. Internalized Oppression is the most insidious difficulty facing any oppressed group, and men are no different in this regard.

Most of the difficulties endured by men are caused by male internalized oppression. These recordings, when re-stimulated, leave the man on whom the recordings have been made feeling discouraged, isolated, guilty, depressed, angry, and vulnerable to reacting with other’s men’s negative recordings in mutual hostility, disappointment, etc.

The study states that the most effective means for contradicting men’s internalized oppression is to find ways for men to become intelligent parts of each others’ lives—to show their flexible, warm, mutually-appreciative selves to each other.

This goes to the root of the isolation internalized by individual men, makes it impossible for internalized oppression to drive men to hurt each other, and rocks the foundations of institutionalized men’s oppression.

For men to make close friends with men is to enable us to become aware of the conditioning that has been put upon us and to want liberation from it. As men reach for friendship with men from different class background, different cultures, and so on, they will inevitably deepen and enrich their awareness of, and their intense desire for, liberation.

It sometimes may appear that directly raising the issues concerning men’s oppression is difficult.

The main reason for this is that men’s stories have not been told—the “real” stories, that is, not just the “public” versions permitted by the oppression.

When the real stories are told then the issues become clearer.

Organizing men’s groups to take turns listening to individual men is a basic activity in men’s liberation.

Men need to reclaim an unshakable understanding of their own inherent goodness. At present men struggle to even notice that they don’t know they are completely good. This is a major obstacle to their quest to find ways to discharge the internalized oppression.

Being seen as the “bad ones” in society leaves men very little room for recovery from their hurts.

We have learned that, in many ways, the young one whose distress leads him (or her) to harm another young one can suffer more from the act, than the recipient of that act. The one who has been hit on the head with the toy truck can be crying and receiving attention, while the one who did the deed can be stuck in feeling bad. and guilty. The other people around are most often (even when they know and understand RC theory) confused about the goodness of the one who did the hitting. Under these conditions, it is very hard for someone who acts out a distress to discharge on it.

In RC's view, when a boy shows by an "unacceptable" act how he has been hurt, and is met with disapproval, punishment, violence, and the upset of adults and other young one's, we have 'pounded him into a very tight corner; even more so if the disapproval is expressed as blame for simply "being a boy". This is the situation for many men.

The liberation of women and men go hand in hand. Because men have been used as the oppressor group toward women through the systematic installation of sexist patterns (beginning very early in the lives of small boys) they need to deal 'specifically with' the damage done to women by sexism.

While it is not men's fault that they have been setup to be the oppressor group over women, men cannot afford any tolerance 'toward continuing to play that role. The slightest oppressor act is completely unworthy of men's inherent excellence. Explicit renunciation of that role and the correction of it by eliminating any sexism anywhere in society fall logically to men. Not only can men throw off the oppressor role, they can also work to eliminate sexism from society. Men can assist women to eliminate their internalized sexism.

In the present human population of approximately five billion people and in the probably emerging population of the next decades, support of the female gender as a whole is tremendously important to all humans.

Large numbers of women world-wide still die in childbirth, lack adequate medical care and food during pregnancy, give birth -to, children who are shortly malnourished and ill, and receive little support from the men around them.

This will change as present oppressions are ended, as modern science increases the possible choices before women, and as reproduction of the species becomes a question of free choice by individuals.

But in all existing levels of society, a vital responsibility is enforced upon the female gender by their unavoidable role in the reproduction of the species.

RC notes that in dealing with "the human male," for simple survival, ending the oppression of sexism and extra care and responsibility for support of women during reproduction and - child rearing is a basic responsibility of men and of all humans.

RC states that there are Nine Principal Institutions which carry on" Oppression of Men."

They are as follows: -

- | | |
|---|--------------------------|
| 1. The armed forces | 6. The sports industries |
| 2. The criminal courts, police and prison | 7. Schools |
| 3. The exploitation of men as workers | 8. Religion |
| 4. The "sex industries" | 9. The family |
| 5. The alcohol, tobacco, pharmaceutical and illegal drug industries | |

There is a relationship among these institutions.

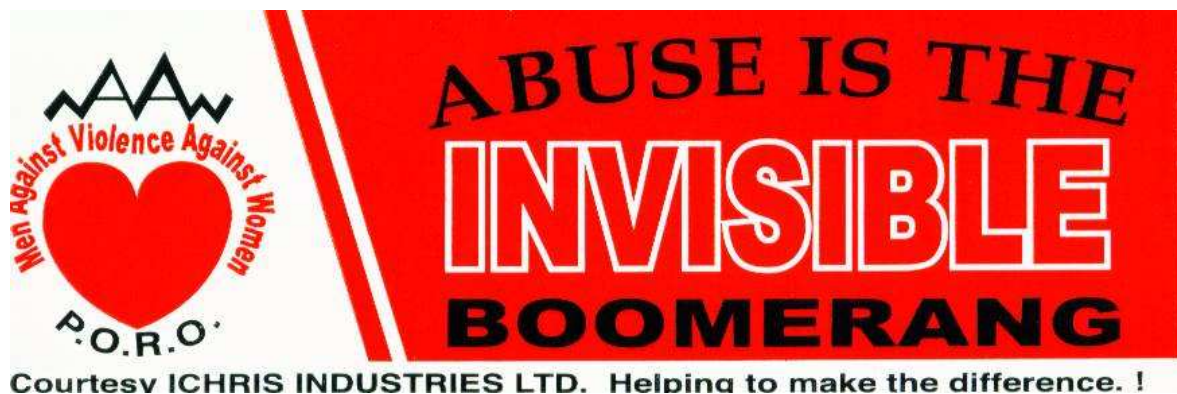
All oppression in some way serves the functioning of the economic system by which wealth is transferred from the working majority of the population to the owning-class minority of the population based on some legal structure, or through custom, or through undisguised greed.

These oppressive institutions are clearly not exceptions to this.

The owning classes of nations compete for natural resources and markets and often resort to military action, and war to protect their "national interests"; the workplace is the vehicle for accumulating wealth; the working majority would not agree to be exploited if not for the threat posed by the criminal justice system, and the addictive "power" of the sports, drug, and sex industries.

Schools, religions, and the family are the places where the messages about what it is to be a man are taught, where people are trained and re-trained for participation in the system and for submission to it.

In our view, as forward thinking men committed to the democratic development of our beloved twin-island State of Trinidad and Tobago, the "Human Rights" approach to ending unacceptable behaviour is the best way forward and we thank and complement those men who have been forging a way forward towards achieving Equality With Equity then and now with their research development.



MAVAW - MEN AGAINST VIOLENCE AGAINST WOMEN in its search for a solution to the male dominated domestic violence also researched some local Institutions and put the following tables forward for your consideration.

Some of the empirical evidence that provide social indicators is statistical data.

In Trinidad and Tobago murders as a result of domestic violence between the years 1995 to 1999 have been statistically described in Table 1 below:

TABLE 1

Year	Murders	SEX		MEANS EMPLOYED					CAUSE			
		M	F	Stab	Gun shot	Chop-wound	Beaten	Other	Dispute	Fight	Abuse	Other
1995	22	7	15	5	1	7	3	6	13	8	-	1
1996	16	4	12	6	-	6	2	2	14	1	-	1
1997	12	2	10	2	2	2	3	2	11	1	-	-
1998	23	10	13	7	1	2	10	3	12	4	3	4
1999	15	4	11	8	1	-	3	3	6	7	-	2
Total	88	27	61	28	5	17	21	16	56	21	3	8

Source: Adopted from Statistics of Modres Operandi and Records Bureau, 1995, 1996, 1997, 1998, 1999 provisional figures. NB: However, some of the males murdered are children, and these are absolute numbers rather than per capita (true statistics).

Murders for the years 1995 to 1999 compared to Murders as a result of Domestic Violence can be analyzed from Table 2 below:

TABLE 2

MURDERS				
YEARS	DOMESTIC VIOLENCE	NON-DOMESTIC VIOLENCE	TOTAL	% DOMESTIC VIOLENCE
1995	22	99	121	18%
1996	16	91	107	15%
1997	12	89	101	12%
1998	23	74	97	24%
1999	15	77	92	16%

Source: See Table 1

As you can see from Table II that domestic violence murders depicted a range of 12% in 1997 to as high as 24% in 1998.

Then it is quite clear that safety in the home amongst relatives is at risk.

It is also highly probable that the victims of domestic violence are safer elsewhere than amongst their relatives.

Further information on physical and sexual abuse committed in Trinidad and Tobago during the period 1995 to 1999.

Table 3 below is a manifestation of Male dominated crimes:

TABLE 3

SEXUAL OFFENCES FOR THE YEARS 1995 - 1999

OFFENCES	1995	1996	1997	1998	1999	TOTAL
Rapes	177	170	226	250	240	1063
Attempt Rapes	4	1	5	4	2	16
Incest	36	25	42	82	41	226
Female Under 14	48	54	135	101	115	453
Female 14-16	31	43	100	94	77	345
Adopted Minor	13	2	2	39	1	57
Mentally Subnormal	0	0	0	2	0	2
Sex with Male under 16	0	0	4	0	0	4
TOTAL	309	295	514	572	476	2166

Source: Modus Operandi Records Bureau, Trinidad and Tobago Police Service



The Domestic Violence Act 27 of 1999 has been enacted to assist in providing some measure of safety to persons experiencing violence in the family environment, but in our view, the Act is insufficient.

Society must not be externally propelled to comply with the criminal injustice system; instead society must develop that internal voluntary commitment for tolerance and anger management among other social factor, in other words, self-discipline.

MAVAW believes that the fight against domestic violence must be internally propelled and in order to give some insight into this internality, we have adopted the “Health” concept, fully appreciating the trans-disciplinary nature inherent in the solution to reducing Domestic Violence.

It has been argued that one of the most widely recognised and most frequently quoted definitions of “Health” is that given by the Geneva -Based World Health Organisation which reads as follows: -

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease and /or infirmity.”

This definition can be interpreted such that health transcends the boundary of the structure and function of your body to include all of the following: -

- • Feelings
- • Values
- • Reasoning
- • Nature of Interpersonal skills.

However, what is fascinating about this definition is that it implies that health can exist in the presence of disease and infirmity.

MAVAW endorses this definition and agrees that “Health” expands such definition supplied by the World Health Organisation.

However, Payne and Hahn (1992) introduced “Holistic Health”, because they felt that it extended the physical, mental and social aspects of life, to include the intellectual and spiritual dimensions.

Holistic Health according to Payne and Hahn (1992) is: -

“The blending of your physical, emotional, social, intellectual and spiritual resources as they assist you in mastering the developmental tasks necessary for you to enjoy a satisfying and productive life.”

This blending is further explained below: -

PHYSICAL DIMENSION:

“Among the physical characteristics are your level of susceptibility to disease, body weight, visual strength and coordination, level of endurance and power of recuperation.

EMOTIONAL DIMENSION:

“This includes the degree to which you are able to cope with stress, remain flexible, and compromise to resolve conflict.

SOCIAL DIMENSION:

“This refers to social duties, whether you label these as social graces, skills, or insights. You probably have much strength in this area.”

INTELLECTUAL DIMENSION:

“Your ability to process and act on information clarify values and beliefs, and to exercise your decision making capacity ranks among the most important aspects of total health.”

SPIRITUAL DIMENSION:

“This goes beyond your religious beliefs and practices to include your relationship with living things, the role of a spiritual direction in your life, the nature of human behaviour, and the willingness to serve others.”

It is against this background that the personal assessment, a personal profile in evaluating your health has been provided for you to assess your personal behaviour in Appendixes One (1) to Six (6) are for your own self test.

The following Chapters on: -

**“CHILD ABUSE”,
“PARTNER ABUSE”,
“ELDER ABUSE” and**

“SEXUAL OFFENCES” provide all the information necessary to fully understand the scope and depth of behaviour identifiable in the Domestic Violence situation.

In addition, we have included in this revision of our **2002 “DOMESTIC VIOLENCE AWARENESS HANDBOOK”** a Section Titled **“MANTALK”**, within which we feature what some of the MAVAW men hold as their personal opinions and beliefs.

As Chairman of this committed organisation **“Men Against Violence Against Women, MAVAW”**, it was a great pleasure working alongside the Secretary and Treasurer to produce the First Edition and now the Second.

Our thanks also go out to our hard working members and friends who made this 2nd Edition possible, contributing to the Violence Reduction E-Books attached to this book.



**CHILD
ABUSE",**

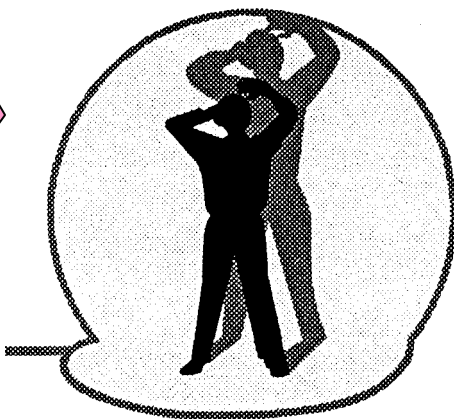


**PARTNER
ABUSE",**

**ELDER
ABUSE**



SEXUAL OFFENCES



PART TWO.

In addition, we have included in this revision of our 2002 "DOMESTIC VIOLENCE AWARENESS HANDBOOK" a Section Titled "MANTALK", within which we feature, what some of the MAVAW men hold as their personal opinions and beliefs.

Child Abuse

Steven and Lorelei Turner were each sentenced to 16 years in prison for abusing their three-year-old son to death. John Ryan Turner's short life was filled with rejection. His days were spent restrained by a harness in his bedroom and he was bound and gagged with a tube sock. He weighed just over 20 pounds at death. Most parts of his emaciated body were covered in bruises, scars, sores and self-inflicted bite marks. Yet experts said it was not physical abuse, but emotional rejection that killed the boy. When he could no longer tolerate his mother's anger and his father's disinterest, he withdrew from the world, stopped eating and wasted away.



We don't know how common child abuse is in Trinidad and Tobago, but it has been estimated that as many as one child in ten is affected: -

- Child abuse can occur in households where the mother/father is being abused by her/his male/female partner, as noted in the section of this book called **Partner Abuse**.
- At least one in four men who are violent to female partners will also hit the children.
- Today's abusive parents will be at high risk of being assaulted as seniors by their adult children, a topic addressed in the section of this book called **Elder Abuse**.
- Younger children may be abused by older siblings or cousins who have themselves been abused by parents.

Indeed, the effects of family violence resonate across the years and through the generations unless the dynamic and practice is interrupted by awareness (like this book), counselling (individual and family) and in some cases, legal intervention.

Sometimes the effects of child abuse show up as bruises or cuts. The more damaging injuries will not heal so easily, or be so readily apparent (developmental neglect) and most often are carried long into their adult lives, ending life in pain. One cannot overestimate the harm caused to developing children and adolescents, and the earlier the abuse starts, the more profound will be the consequences. *Some medical research suggests that early abuse or neglect, triggers permanent changes in the brain of a developing child.* Imagine the emotional confusion, of being simultaneously scared of and dependent upon a parent: to be hurt by the person you look to for love and guidance, a person who probably can be caring and gentle at times.

The effects of witnessing the abuse of your mother/father are discussed in the next section of this book. As noted there, if a father-figure is abusing the children, their mother is probably being abused by him as well, **and vice versa**. How can your mother/father protect you from abuse if she/he cannot protect herself/himself?

Child abuse can lead to **emotional problems**, such as *depression and anxiety*, or **behavioural problems** such as *aggression*.

Symptoms of the effects can include *nightmares, sleep disturbances, withdrawal from social activities, isolation from peers, aggression with peers, phobias, stomach aches and other somatic complaints, anger and temper outbursts, destruction of property, irritability, bedwetting and, in some cases, self-injurious behaviour and thoughts of suicide*.

Children may **regress to behaviours** more typically found in younger ones, such as *dinginess or thumb sucking*.

Teenagers may engage in **self-destructive behaviours** such as *drug or alcohol abuse, criminal activity, running away, or prostitution*.

Some girls will try and get pregnant in an attempt to find unconditional love from a baby or to gain independence from the family.

Abused children **may feel** hopeless about the future, suffer low- self-esteem, have difficulty trusting and see the world as a dangerous place. Once they realize that their schoolmates do not experience abuse, these children feel alone and ashamed. They learn to keep the family secrets, rarely if ever bring friends home, and see themselves as inferior to their peers. Children from abusive homes may fantasize about life in a “normal” family and many leave homes early.

It can be assumed that at least one child in each classroom in the country is affected by abuse at home, either abuse of themselves, their mothers, or both. Informed observers estimate that the average class actually has three to five children affected by abuse.

But teachers will rarely be able to recognize the abused children in their classes. They try very hard to blend in and may vigorously deny suggestions of abuse when confronted. Abused children may or may not have problems at school. For some, school is a safe place and they appear to function well, perhaps even excelling in academics or sports activities. They may engage in many extra-curricular activities, to avoid going home after school.

On the other hand, child abuse often contributes to poor school performance in part because of chronic absenteeism, problems concentrating, lack of sleep, or poor nutrition. *Abused children may be aggressive at school and get into trouble repeatedly.*

As adults, these children may be at higher risk of substance abuse, mental health diagnoses, problems with intimacy in relationships, and eating disorders. Some observers suggest that both males and females who enter the sex trade do so in part because of childhood sexual abuse.

As teenagers, abused girls may find themselves in abusive dating relationships and as women; they may become involved with abusive partners.

Abused boys may grow up to be **those abusive partners**. Women who were sexually abused as girls are more likely to report that they had been sexually assaulted as an adult or sexually harassed in the workplace.

As teenagers and adults, abused boys (and some girls) may be at higher risk of sexual offending. While the majority of sexually abused boys will not offend sexually, it is often found that known sex offenders are likely to acknowledge a history of sexual abuse in childhood.

For example, a study reported in a 1995 issue of the Journal of Abnormal Psychology found that 75% of adolescent males who had sexually assaulted a boy reported a childhood history of sexual abuse.

In the USA a history of child abuse is a common characteristic among groups of known criminal offenders. *For example, a study of women in jails or on probation found that 76% of them acknowledged being physically abused as children and half said they had been sexually abused.*

Childhood abuse may elevate a person's chances of being violent in adulthood. *A study of male federal offenders found that the likelihood of having an offence history involving violence was three times higher if the inmate had been abused as a child.*

As reported in a 1996 article from the Archives of Pediatrics and Adolescent Medicine, a long-term follow up study of abused children found that, by age 32, half of them had been arrested at least once. One in five had been arrested for at least one violent offence, a higher rate than observed for similar individuals with no history of abuse.

Is child abuse increasing? No one knows, but our collective attitudes toward the subject have certainly changed. Our conception of child abuse has broadened from an emphasis on broken bones as the primary indicator to recognition of the harmful effect of words.

Child abuse can be physical, emotional or sexual. Physical and emotional neglect are also forms of child abuse.

A study reported in a 1994 issue of the scholarly journal Child Abuse and Neglect found that in only 5% of cases did children experience only one form of abuse. The most damaging combination was neglect, physical abuse and emotional abuse.

Experts generally agree that most parents who abuse their children will continue to do so unless they get help, or until the child leaves the home. Early intervention is the key to preventing or limiting the damage caused by child abuse.

LOCAL STATISTICAL DATA

Physical Abuse

The baby didn't stand a chance. When she cried her mother would hit her in the stomach. She would slap her on the head, or cover the infant's mouth and nose with a pillow. But it was the shaking — so hard the baby's brain would ricochet inside her skull — that finally silenced her. She was left severely brain damaged and blind.

A child is **physically abused** if he/she is hit, punched, slapped, burned, thrown, kicked, restrained, or confined unreasonably. Physical abuse can be carried out with weapons or with household objects such as extension cords, rulers, belts, cutlery, or sticks.

Infants are vulnerable to “shaken baby syndrome” which results in permanent damage to the brain. *In a statistics study of intentional injuries suffered by children, more than half of the victims were five years old or younger. Three quarters were under ten.*

It would appear that younger children are the most vulnerable to injury, including soft tissue damage, broken bones and lacerations. According to statistics, averages of 20 infants are murdered each year, almost all by fathers, mothers or other relatives. It is suspected that this number is a dramatic underestimate because child abuse deaths might be put down to sudden infant death syndrome (SIDS) or other natural causes. *Eight infants were murdered in 1995, three by their fathers, three by their mothers, and one by an aunt.*

LOCAL STATISTICAL DATA

Neglect

An 18-year-old woman is in police custody after two young children were found unattended in a ninth-floor apartment. When officers arrived at 1:15 a.m., they found the apartment locked and the stereo at high volume. The apartment was in disarray and the children, a 21-month-old female and a 10-month-old male, were located in the bedroom. Officers, who changed and fed the toddlers, said the apartment was filthy.

Child neglect can be **emotional or physical**. Often the two occur together.

Physical neglect is when a parent or parent surrogate does not give a child adequate nutrition, clothing, hygiene, safe living conditions, supervision, or access to medical care. A physically neglected child may ask the neighbours for food, not wear winter boots when it snows, or be left at home alone.

Emotional neglect occurs when a parent fails to give a child attention, nurturance or intellectual stimulation. An emotionally neglected child may watch television all day or wander the neighbourhood from morning till night. They may crave attention from adults and spend a lot of time at neighbours' houses. Neglected babies spend long periods of time in their cribs.

Neglect can be done on purpose, as when one child is singled out for poor treatment while the other children are well cared for. More commonly, neglect is not intentional. Neglect is not to be equated with poverty, however. The root of neglect is often the alcoholism or mental illness of the parent. Older siblings sometimes adopt the parental role and care as best they can for the younger ones. Broken homes produce another painful form of neglect when parents fight.

(According to the National Center on Child Abuse and Neglect, in 1997 about 3 million children in the United States were reported as abused or neglected to government agencies that investigate child abuse. Investigators substantiated abuse or neglect for nearly 1 million of the children reported. Among substantiated cases, 56 percent involved physical or emotional neglect, 25 percent involved physical abuse, 13 percent involved sexual abuse, 6 percent involved emotional abuse, and 13 percent involved other abuse, such as educational neglect or abandonment. Some children experienced multiple forms of abuse.)

Emotional Abuse

"My mother says she wishes I was never born."
(11-year-old girl calling Kids Help Phone)



Emotional abuse, sometimes called **psychological abuse or verbal abuse**, leaves no physical scars but is devastating to a child's developing sense of self and worth.

It includes teasing, belittling and destructive criticism, threats of rejection, insults, taunts, and humiliation. An emotionally-abused child will probably see him or herself as useless, stupid, and unworthy of being loved or respected.

Sexual Abuse

A prominent university professor who sexually abused his daughter has been sentenced to four years in prison. She was 13 when the abuse began and 18 when it ended. In 1991, when she finally disclosed her father's crimes to police, she told them he had continued to abuse her on weekend passes from the psychiatric hospital where she had been admitted after suffering a nervous breakdown.

There are a range of behaviours which are sexually-abusive, from exposure of genitals to intercourse. **Sexual abuse** includes fondling, digital penetration of the vagina or anus, simulated intercourse, oral sex, and asking a child to touch an adult in a sexual way.

It also includes inappropriate observation of children (as they dress or bathe), exposure of children to pornography, taking sexually-suggestive pictures of children, or making them watch adults have sex. *Sexual abuse can only rarely be discerned by a medical examination.*

A key feature of child sexual abuse within the family is that it rarely involves an isolated incident. Children are at highest risk for sexual abuse in their own homes or the homes of the abusers, usually one in the same.

This privacy affords many opportunities for unobserved contact with the child, such as bath time or when the child is in bed. But opportunity is not enough. The abuser must trick or otherwise convince the child not to tell anyone what is happening. The child may be too young to realize it is wrong, may mistake the abuse for affection, or may be tricked into thinking it is a game that everyone does.

If or when a child recognizes the abuse as wrong, the abuser can lead them to believe that something bad will happen if the secret gets out. That bad consequence could be for the child, for non-abusive family members, or for the abuser him/herself, whom the child probably loves. Silence can be secured with threats of violence, death, paternal/maternal rejection, or punishment.

A child may want to spare his/her mother/father the anguish of finding out about the abuse, an event which may be followed by the breakup of her/his marriage if the abuser is a marital partner.

It is common that children are assured no one will believe them if they tell or that everyone will think the abuse is their fault. They may think they will go to jail or worry about the consequences for the family if the abuser goes to jail or loses his job.

Contrary to popular belief, a person does not have to be a pedophile to sexually abuse children. Many child sexual abusers are sexually involved with people of their own age or have been able to maintain such relationships in the past.

Sexual offenders are likely to deny their crimes and treatment is unlikely to be successful if this stance is maintained. Some sexual abusers rationalize their behaviour to themselves and others with excuses such as the child was sexually aggressive, the child consented to the activity, or that the abuse was educational.

Almost all known perpetrators of child sexual abuse are male. *Most known cases of sexual abuse involve girls but the true rate of the abuse of boys may be hidden because they are extremely reluctant to come forward.*

Girls are more likely to be sexually abused by someone within the family while boys more often report sexual abuse by adult acquaintances or community professionals. It is often the case that children who were sexually abused by a family member will have been physically abused by him/her as well.

Where physical and sexual abuse are combined, it is highly unlikely that the child will be able to come forward, in part because of fear of the violent repercussions if the disclosure is not believed or not responded to quickly.

LOCAL STATISTICAL DATA

Why Would A Parent Abuse A Child?



The causes of child abuse are as complex as the phenomenon itself and are different for each of the four types of child abuse. The factors identified by researchers to be associated with child abuse break down into four categories.

1. PERSONALITY OF THE ABUSER

Abusive parents usually love their children as much as any parent does, but they often lack parenting skills or maturity, or have personal problems such as substance abuse or mental illness. They tend to have low-self esteem, poor impulse control and may use aggression in other contexts as well. They could be depressed and feel lonely and unhappy. They may not have good social support networks or the social skills to acquire one.

It is often observed that many abusive parents were themselves abused as children giving rise to speculation that they had little or no opportunity to learn non-violent parenting skills.

Abusive parents may also be inflexible, easily annoyed, have unrealistic expectations of children or view their children's behaviour as unusually stressful and negative.

2. CHARACTERISTICS OF THE FAMILY

Child abuse is rarely the only problem in the family. It may be an extreme manifestation of what has come to be called family "dysfunction." Family problems found to co-exist with child abuse include marital conflict, partner abuse, inter-personal hostility, chaos and disorganization, substance abuse, lack of affection and caring, and poor communication.

There may be a large number of closely-spaced children, frequent changes to the composition of the family and many residential moves. Unemployment, chronic illness and other stressful life events which constitute surmountable challenges to most families can strain the coping strategies of abusive parents.

While blaming the child for abuse is often a fallacious excuse used by abusers, there is some research to show that children in some abusive families are temperamentally more difficult to manage.

This becomes a vicious circle as the negative effects of child abuse worsen the problem behaviours and escalate the use of violence and abuse against them. Sibling-to-sibling violence may be tolerated, even encouraged in these families.

3. COMMUNITY FACTORS

Children and their families do not live in a vacuum. They are affected, positively or negatively, by the quality of local schools, levels of neighbourhood cohesion and stability, and economic conditions. For example, the incidence of child maltreatment in an area may increase if local unemployment rates go up.

Social isolation is a factor common to many abusive families so contact with neighbours can provide protection against caregiver stress, opportunities to observe good parenting, and the surveillance which can lead to early identification of abusive patterns.

Neighbourhoods can also be a negative force, if there is a local tolerance of violence or a collective distrust of police and helping professionals. The presence or absence of effective social resources is also important, such as recreational facilities, public health programs to assist young mothers, and well-funded child protection agencies which can engage in prevention rather than just crisis intervention.

4. SOCIETAL FACTORS

Many people feel that corporal punishment of children is acceptable. This tolerance of physical discipline sends the message that it is okay to hit children.

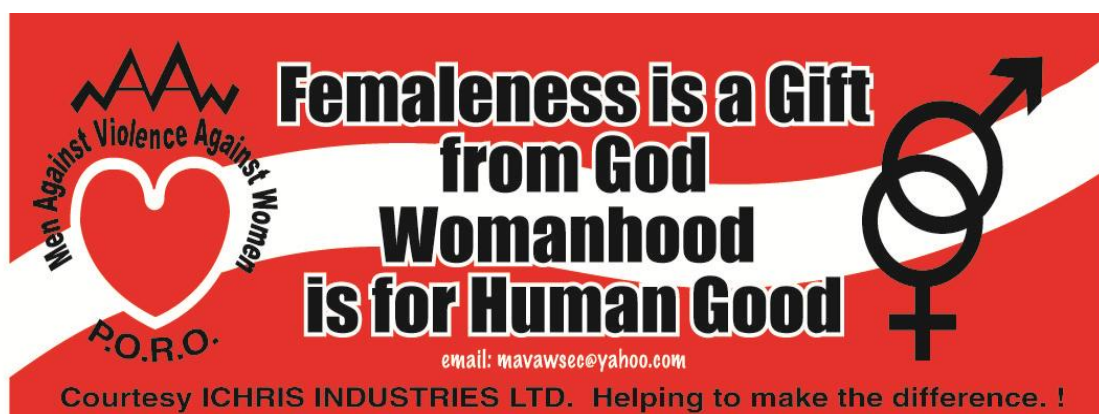
We also see the family as a private institution and are reluctant to interfere with the right of parents to raise children as they see fit. In addition, the use of violence against children cannot be divorced from our general tolerance of violence in society, as evidenced by the pervasiveness of violence in the media.

Seeing children as legitimate sexual targets can be encouraged by advertising where young children are posed to look seductive. There is also widespread access to pornography (on the internet for example) and a reluctance to enforce laws against child prostitution.

Society tolerates child poverty even though it is highly correlated with rates of child abuse and other negative outcomes for children.

Some people believe that stressful circumstances can cause otherwise adequate parents to act abusively. In a small number of cases, caregiver stress may be at the root of child abuse, especially if the child is a baby or toddler and the parent is socially isolated and has no opportunities for respite.

Children with disabilities may also be more vulnerable to abuse in part because of the demands placed on caregivers. Parenting a young child or a disabled child can be stressful but the vast majority of parents are able to cope and find non-abusive ways of relieving the stress.



What To Do If A Child Tells You About Abuse



Many thoughts may run through your mind but remember that the most important consideration is that the child should be protected from further abuse, as should other children who may come into contact with the alleged abuser.

It is extremely difficult for children to tell an adult about abuse and they have chosen you specifically because they trust you to help them. If you let them down, they not make another disclosure for a long time.

There are two stages to your response: -

FIRST, you must deal with the immediate needs of the child. It is important to remain calm and not overreact. You may feel angry, guilty, sad, scared or a whole host of other emotions but there will be many opportunities to express these feelings later. Right now, find a quiet and private place and make sure the child knows: -

- You are glad that they had the courage to tell someone
- You are not angry with them
- You do not feel what happened was their fault
- You are going to make sure they are safe

Do not try and solicit details about the abusive behaviour or ask a lot of questions of the child.

SECOND, you must call the authorities, even if you have doubts if what you were told is true. You are legally obliged to report the matter and you may be charged with an offence if you do not. It is the job of the proper authorities to investigate allegations and they will determine how the case should be handled. Either call the police or contact the local office of the child protection authorities in your area.

If You Suspect A Child Is Being Abused

Use caution and good sense in identifying child abuse. Every parent makes errors in judgement and action some times. But when it becomes plain that this is a PATTERN or is becoming one, then IT'S TIME FOR HELP.



It is the law that you must report your suspicions to the proper authorities if you believe a child is being abused by a family member or other caretaker such as a daycare worker or teacher to report suspected cases of child abuse, you can call the police or the local child protection office. You do not have to have absolute proof or even be certain that the abuse is occurring.

As long as your concern is genuine and not malicious, you cannot get in trouble for making a report.

Many times neighbours, teachers and family members who suspect a child is being abused do not call the authorities because they "don't want to get involved" or they don't want to ruin someone's reputation with an accusation of child abuse.

However, reporting a suspicion to the proper authorities is a confidential process. These officials have the knowledge and experience to decide if a set of circumstances warrants an investigation.

What Happens When A Report Is Made: The Intervention Process

There are many options legally available to child welfare officials, some more intrusive than others. The decisions are always made using one criterion, however: the child's best interests.

Sometimes the parents are not happy about how the agency responds to the matter, but child protection workers are legally required to do what they perceive to be best for the children.

First, they will investigate the allegation, probably by interviewing the child and any other parties who can provide information, to refute or substantiate the allegation. The Incidence Study of Reported Child Abuse and Neglect found that two out of every 100 children are the subjects of reports to child protection authorities. Of these reports, about one in four is substantiated. In other words, in the majority of cases, it was determined that the allegation was groundless, there was no current risk, or that there was not enough evidence for the authorities to act.

If the investigation results in the substantiation of abuse, there are a number of avenues open, all premised on providing a safe environment for the child.

1. The parents may be asked to participate in counselling sessions and/or be amenable to having child protection workers monitor the home environment. Effective parenting is a skill that must be learned, and many abusive parents benefit from support and guidance in this area
2. In a few cases, the authorities will feel that the child's interests are best served by living apart from the family for a while, in a foster or group home. They will seek parental cooperation with whatever plan they deem best but parents who disagree can take the case to court so a judge can review the evidence and make the decision.

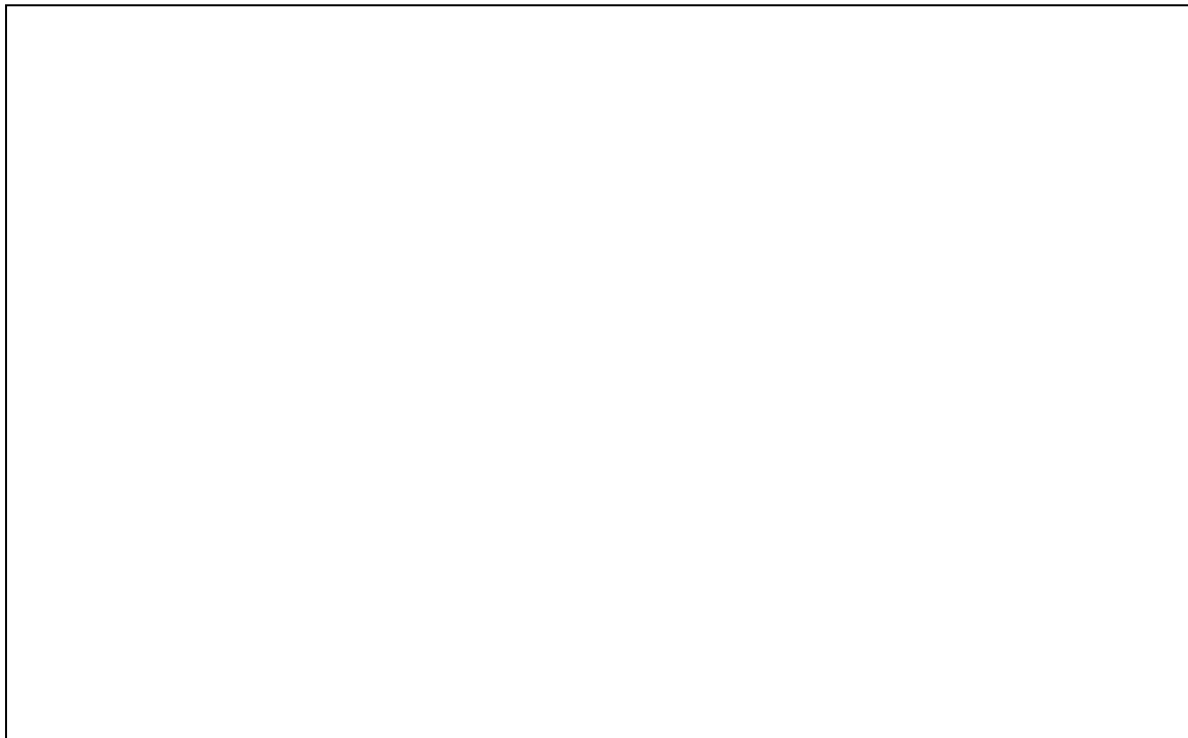
Some physically abusive parents rationalize their behaviour as being discipline and, indeed, the law recognizes that parents can spank their children in some circumstances.

An act which, if directed toward another adult, would be a criminal assault can be excused by the courts if the parent used "reasonable force" for the "correction" of a child.

While experts agree that an effective parent does not have to use corporal punishment, there are individuals who use spanking in a measured and systematic way as the severest consequence, used sparingly when lesser forms of discipline have failed.

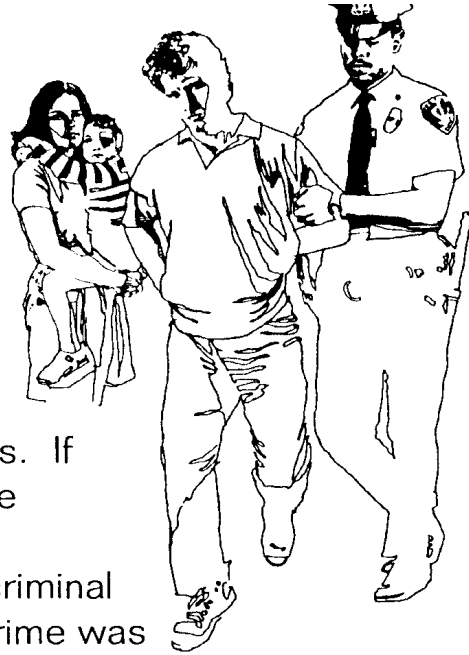
More often however, a parent will use spanking in a sporadic and harmful way, in response to the build up of frustration or as a reflection of the parent's bad mood.

Child protection officials are often called upon to assess when an assault against a child is abusive and when it is discipline. Some of these cases go to court so a judge becomes the arbiter.



Charging A Parent With A Crime

In some areas, the child protection agencies conduct investigations jointly with the police. This is because most forms of child abuse are criminal offences. If the police have “reasonable and probable grounds” to believe that a crime was committed, they may well decide to lay criminal charges. They may also believe that a crime was committed but not lay charges.



This could be because: -

- there is not enough available evidence to secure a conviction in court,
- the actions of the child protection agency are sufficient to keep the child safe from further abuse,
- the alleged offence occurred many years ago,
- the alleged perpetrator was under 12 years of age,
- the alleged perpetrator is already in prison, or
- the child is too young or emotionally fragile to testify in court.

Neglect of children can lead to charges such as child abandonment or failure to provide the necessities of life.

Physical abuse of children typically results in charges of assault, assault with a weapon, assault causing bodily harm or, in extreme cases, attempted murder.

While experts in child development recognize the harm in exposure to emotional abuse and emotional neglect, they are not criminal offences, unless specific threats were uttered.



Children In Court



If criminal charges are laid, the matter will be resolved in court. The accused person can plead guilty and be sentenced, or he can plead not guilty and have a trial. If the case goes to trial, the child or children who were the victims of or witnesses to the offence will probably have to testify, at least once and possibly twice.

This is an experience that few adults look forward to with anything but trepidation.

For children, the thought of testifying, in front of the person who abused them, can be frightening.

In most areas, victim/witness assistance programs exist to help children and other witnesses before during and after they testify. Information on how to find the victim/witnesses assistance program in your community is listed in the section of this book about **Partner Abuse**.

In some parts of the world, there are specialized programs designed to assist children in court. Also depending upon where you live, child witnesses may be able to testify from outside the courtroom using a closed-circuit video system.

If You Are An Abused Child

"When my father flips out, he bashes me around and throws me into the walls. What can I do?" (14-year-old girl calling Kids Help Phone)

If you are being abused by a family member, always remember that:

- you are not the only person this is happening to
- it is not your fault
- you have every right to want it to stop
- there are people in your community who can help

The first step is to tell a trusted adult what is happening. The trusted adult you pick could be a neighbour, police officer, doctor, Lecturer or school principal, or one of your friend's parents. Or sometimes it is easier to tell a friend and then give him or her permission to tell an adult.

If You Are An Adult Who Was Abused As A Child



In addition to the legal considerations, however, there are many emotional consequences which should be considered if you want to pursue the case in court. If you have never before disclosed your experiences, prepare yourself for the fallout your disclosure could trigger in your family. Gather an effective support network and consider joining a support group.

It is important to note, however, that child protection authorities should be notified if the family member who abused you as a child has any contact today with children.

Some Questions And Answers

1. TO WHAT AGE ARE CHILDREN PROTECTED UNDER CHILD ABUSE LAWS?

This varies from area to area, but is typically either 14 or 16. Check with the local authorities or ask a lawyer. If the abuse involved a criminal offence, there is no age restriction on when police can become involved.

2. WHAT HAPPENS TO THE ALLEGED ABUSER ONCE A REPORT IS MADE?

If the alleged abuser is charged with a criminal offence, he will almost always be required to stay away from the child during the period before court. If he denies the offence, he can have a trial where the attorney will have to prove guilt beyond a reasonable doubt. If convicted, the penalties range in severity from an absolute discharge through to imprisonment. The judge who chooses the sentence may keep in the mind the desirability of counselling.

If the matter is handled through the child protection system only, the alleged abuser may also be asked to live for a period of time outside the family home, but this is not always the case. It is common that child abusers will be asked to participate in group or individual counselling to address the causes of the behaviour and try and reduce the future risk of abuse for the child or children involved. The family may be supervised by a child protection worker to help them learn non-abusive parenting strategies. This supervision is also undertaken to monitor the safety of the children.

3. CAN A PARENT LOSE CUSTODY OF A CHILD BECAUSE OF ABUSE?

Yes. In extreme cases, child protection authorities will feel that a child is not safe living at home and may use their legal power to remove the child. This is a serious measure and used only when absolutely necessary. More commonly, their efforts are aimed at supporting the parents and keeping the family united. Even when a child is apprehended, the long-term goal is usually family reunification. In some cases, if these efforts fail, the agency will ask a court to terminate parental custody. These children become wards of the state and may be placed for adoption. Termination of parental custody is rare and there has to be good proof that such a move is in the child's best interests. If the child has one abusive parent and one non-offending parent who

do not live together, the two parents may find themselves in a custody battle

Or, they may argue over the frequency and conditions of visits between the non-custodial parent and the children. If they cannot come to an agreement, a court must decide what is in the child's best interests. A mental health assessment may be undertaken in these cases to disentangle the children's interests from the often acrimonious conflict between the parents. If a parent is judged to be a risk to the children, any access visits will probably have to be supervised by a responsible third party. It is extremely rare, but it is possible that a court can terminate permanently the right of an abusive parent to see the child.

4. CAN A CHILD SUE AN ABUSIVE PARENT?

Yes. In some cases. Although rarely undertaken until the child has reached adulthood, more and more abused children are taking their parents to court to sue for damages. This can be done even if the matter has already been the subject of a criminal trial and even if the outcome of that trial was an acquittal. Only a lawyer who reviews the circumstances of the specific case can determine if civil litigation is feasible. If the matter is pursued, one possible outcome is that the abusive parent could be ordered by the court to pay a specified sum of money to the plaintiff as compensation. There is a time limit on when you can launch such a suit so those contemplating legal action should seek legal advice as soon as possible.

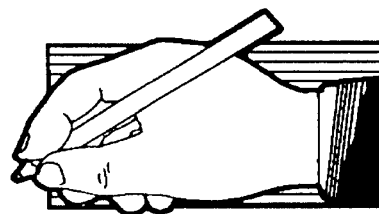
5. ARE ALL CHILDREN AFFECTED IN THE SAME WAY BY CHILD ABUSE?

No. For example, girls and boys can be affected differently. It is generally observed that boys tend to "act out" with aggression, property destruction etc. while girls "act in" with depression and health problems. Abuse which starts later in life or which is perpetrated by a person outside the nuclear family such as an uncle may be less damaging than abuse which started during infancy and was perpetrated by a parent and there are children who are resilient to the negative effects of child abuse and remain asymptomatic.

6. WILL ALL ABUSED CHILDREN HAVE PROBLEMS AS ADULTS?

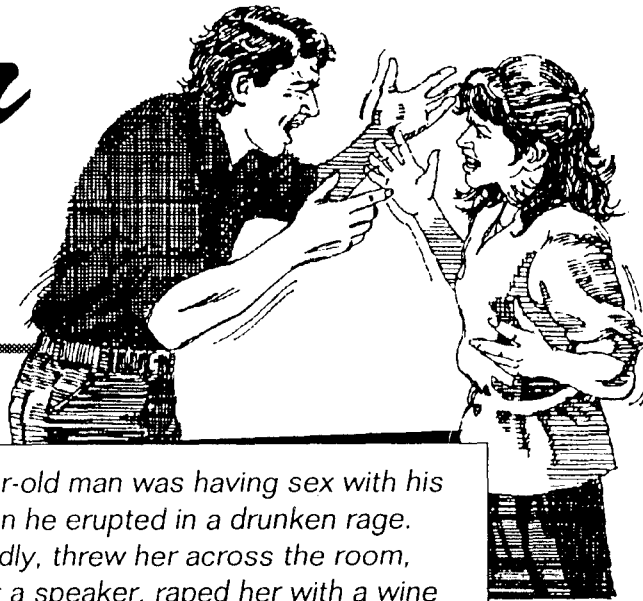
No. Child Abuse is not a mandatory life sentence. Protective factors which buffer a child from some or all of the harmful effects of child abuse include having a stable and supportive adult figure in their lives during childhood (which can include a therapist) and having a good support network as an adult. As adults, they can talk about the abuse and be angry that it happened while clearly attributing the blame to the abuser and not themselves. Intelligent children, those who do well in school or those who have an area of competence (e.g., sports, music) may also fare better in the long run.

*Where To Write For
More Information*



If a child is being abused or is at risk of abuse, you must report your concerns to the proper authorities without delay, as discussed above. To learn more about child abuse in general, try your local library, public health department, child welfare agency, National Family Services, The Legal Aid Clinic, The Legal Aid and Advisory Authority, Community Police Section, or contact organizations which engage in public education. Some of them will provide lists of publications which can be ordered.

Partner Abuse



In the U.S.A. a 20-year-old man was having sex with his common-law wife when he erupted in a drunken rage. He struck her repeatedly, threw her across the room, pushed her up against a speaker, raped her with a wine bottle, and threatened her with a knife.

Statistics estimates that one million women are sexually or physically assaulted each year. In dark alleys or deserted parking garages? A few, but most of these incidents were perpetrated by a family member, intimate partner or friend.

A woman is at greater risk of violence in her own home than on the street. In fact, three in ten women who are or have been in marital or common-law relationships with men were physically or sexually assaulted at least once by at least one of them. This represents 2.6 million women. One third of them feared for their lives because of the intensity or frequency of the violence and four out of ten received medical attention for injuries.

Think of ten women you know. Is it hard to believe that three of them have been assaulted by a partner? If your answer is "yes" it is partly because crimes in the family are well hidden in most cases.

The abused woman is often embarrassed and reluctant to confide in family, friends or co-workers. She may blame herself, for not being a good enough wife to prevent his rages. She thinks it won't happen again or hopes he will change because he keeps promising to stop drinking or get counselling. And she wants to keep the family together for the sake of the children.

Or she has no other place to go, worries about retaliation by the man should she leave, or is experiencing an overwhelming feeling of hopelessness about her ability to rid her life of violence.

The neighbours may not know, but if there are children in the family, they will likely be aware of the violence, no matter how hard a mother tries to keep it a secret from them.

The consequences of family violence — for women, children and society as a whole — are serious and long-lasting. Women can be affected in ways far beyond physical injury and living with chronic fear: emotional troubles, thoughts of suicide, poor health and difficulty keeping a job, poverty, and substance abuse. Children can carry the legacies of violence over their entire lives and it will probably impact their adult relationships.

Society bears many financial costs because of violence against women: health care, criminal justice interventions, criminal injuries compensation, mental health services, child protection services, and lost productivity in the workplace, in addition to the direct costs of crisis intervention, transitional housing, and counselling of abused women and their children.

A study conducted by the Centre for Research on Violence Against Women and Children estimated the cost of violence against women, borne largely by tax payers, exceeds \$4 billion each year. For example, incarcerating and supervising men convicted of assaulting their partners costs well over \$250 million each year.

Partner abuse goes by many different names: wife battery, spousal abuse, domestic violence, marital rape, or conjugal assault. It occurs in affluent and poor neighbourhoods, in cities and in the country, in both heterosexual and gay or lesbian relationships.

Young women may be at highest risk but partner abuse can continue into the senior years, as discussed in the section of this booklet on Elder Abuse. Educated women are abused and their thoughts and feelings are no different from those who did not finish school. Although far less common, men can be assaulted by their female partners. Disabled women who are abused face added challenges to coming forward and accessing effective assistance.

The information presented below may help you understand more about the experiences of women who are assaulted by men who say they love them.

The Continuum Of Abuse

"The real damage is to your understanding of yourself as a human being. I believed there was something fundamentally flawed, that I was missing something that other women who weren't being abused had." (personal account told to the Panel on Violence Against Women)

The National Clearinghouse on Family Violence defines spouse abuse as "an attempt to control the behaviour of a wife, common-law partner or girlfriend. It is a misuse of power which uses the bonds of intimacy, trust and dependency to make the woman unequal, powerless and unsafe."

Severe, repeated violence occurs in one in 14 relationships. But there is a continuum of abuse which ranges from verbal insults through to the repeated infliction of life-threatening injuries and even murder.

The goal, whether intentional or not, is always to give the abuser the upper hand, to use physical, economic or emotional power to be in control and to put the woman in a position of powerlessness. Sometimes this is done with words and sometimes it is done with violence or threats of violence.

One in ten women in a relationship was hit by her male partner last year. But you don't have to be hit to be abused. Partner abuse can be manifested in one, two or all three of these ways:

EMOTIONAL ABUSE

Emotional abuse can take the form of demeaning comments and insults, such as repeated taunts about being useless, lazy, fat, frigid, ugly, or stupid. It also includes controlling behaviour such as withholding money, dictating how she dresses, threats of suicide, threats of taking the children, surveillance, criticism, baseless jealousy, abusing pets, and destroying sentimental and valued possessions.

SEXUAL ABUSE

Forcing you to have sex or forcing you to engage in a type of sexual activity you find distasteful or painful is sexual abuse, placing you at risk of AIDS or other sexually-transmitted diseases by refusing to wear a condom is also sexual abuse.

PHYSICAL ABUSE

Physical abuse includes slapping, punching, kicking, shoving, choking, burning, biting, pushing down stairs, stabbing or slashing with a knife, shooting, or hitting with an object. It may or may not result in visible injury.

One quarter of women who are physically assaulted by a partner are also sexually assaulted by him and almost all of them report emotional abuse.

Abuse can be episodic, worse at some times than others, or it can be continual. Abuse can escalate in severity over time. Or a few violent incidents can be followed by years of intimidation and threats which never again manifest themselves in physical assault.

Partner abuse can end with the murder of the woman, even if she has ended the relationship. A woman is nine times more likely to be killed by her spouse than by a stranger. When a woman is killed by a current or former partner, it is a virtual certainty that the murder was preceded by months or years of physical abuse, only sometimes known to the police.

In 1995, 21 men were killed by their wives while 69 women were killed by their husbands or ex-spouses. Many of the women who killed male partners were acting in self-defense or while protecting their children.

Risk of being murdered is higher in common-law than married unions, higher if there is a wide disparity in the ages of the couple, and higher for younger women.



Some Warning Signs In A Relationship

According to the Violence Against Women Survey, a relatively small proportion of assaulted women (less than 1 in 5) said that the man was violent during the time they were dating. For the majority, the violence began after they had married or moved in together, once strong emotional bonds had been established. (Holly Johnson, "Dangerous Domains")

Abusive behaviour may not start in the early stages of a relationship. In fact, abusive men can be extremely attentive and affectionate and may even put the woman "on a pedestal." They may be inordinately dependent and needy, making statements like they could not continue living if the woman ever left, or they can be remote and brooding. If there is going to be violence in a relationship, it often starts when the woman is pregnant. One in five women who are physically assaulted when pregnant will suffer a miscarriage.

Some women report that there were no warning signs. It is hard to generalize, but there are some characteristics shared by many abusive men. Some of them can be warning signals of violence in the future, especially if many are present. It is easier to predict which men will be violent than to predict which women will find themselves in an abusive relationship.

HISTORY: A man is at higher risk than average of being violent to a partner if:

- His father was violent towards his mother
- He has been abusive to a previous partner and has not undergone counselling focused specifically on male battering.

ATTITUDES: Abusive men may think that abuse is okay, that it is a perfectly acceptable way to resolve problems or deal with stress and frustration. Abusive men often hold generally negative attitudes toward women. A man is at higher risk than average of being violent to a partner if:

- He believes that the man should be the boss
- He believes that hitting a woman can be appropriate in some circumstances
- He has friends who support the view that a man should be the boss and believe that slapping a woman to keep her in line is appropriate

Having a social network of family members and peers who condone or encourage his attitudes means both that the man will gain status from partner abuse and that he can continue to view his behaviour as acceptable and normal.

BEHAVIOURS: In the early stages of a relationship, some behaviour can be warning signs of violence in the future. A man is at higher risk than average of being violent to a partner if he demonstrates a pattern of these behaviours:

- **Control:** Partner abuse may first be manifested by attempts to control the woman's life as with the need to know where she is every minute of the day or whom she is with. It can also include possessiveness and baseless jealousy.

- Fostering social isolation: An abusive man may discourage his partner's contacts with friends and family. Over time, he can cut her off from her entire social support network.
- Emotional abuse: A physically abusive man is usually emotionally abusive as well but the emotional abuse will probably start first.
- Poor communication skills: Men who cannot talk out their problems or identify their feelings with words may react to stress and frustration with abusive outbursts.
- Externalizing blame: If everything is someone else's fault and the man is not able to accept responsibility for his own wrongdoing, he can easily rationalize any violence as being justified and fail to see himself as being at fault.
- Quick temper: Also sometimes called a "short fuse," men who anger quickly and in situations which do not anger others may be more prone to partner abuse.

Abusive men may have problems in other facets of their lives:

difficulty holding a job,
drinking too much, or
involvement in crime.

Statistically speaking, they are likely to be young, unemployed, not financially well off, and living common-law with the woman. But abusive men can be university graduates, successful in their professions, sober, and respected members of their places of worship. Violent men are often charming and popular outside the home.

If you are reading this booklet and your first thought was that you must hide it from your partner, you might be ready to label what is happening to you as abusive.

Power And Control

"When you hear you're stupid, you're ugly, things like that often enough, you begin to believe it. Then you start to question everything you do."

The Domestic Abuse Intervention Project provides counselling to men who abuse their partners. They developed a list of ways men exercise power and control over partners which can lead to or co exist with violence. Violence is a means not an end. It is one way a man can achieve and maintain power over and control of the woman. The use of these techniques, whether conscious or not, has the end result of isolating the woman, keeping her focused on him, and depleting her inner resources.

EMOTIONAL ABUSE

Putting her down, making her feel bad about herself, calling her names, making her think she is crazy, playing mind games, humiliating her, making her feel guilty, etc. The opposite is RESPECT: listening non-judgmentally, being emotionally affirming and understanding, valuing her opinions.

INTIMIDATION

Making her afraid by using looks, actions, gestures, smashing things, destroying her property, abusing pets, displaying weapons, etc. The opposite is NON-THREATENING BEHAVIOUR: talking and acting so that she feels safe and comfortable expressing herself and doing things.

COERCION AND THREATS

Making and/or carrying out threats to do something to hurt her, threatening to leave her, to commit suicide, to report her to welfare, making her withdraw cooperation with criminal

prosecutions against him, making her do illegal things, etc. The opposite is NEGOTIATION AND FAIRNESS: seeking mutually satisfying resolutions to conflict, accepting change and being willing to compromise.

ECONOMIC ABUSE

Preventing her from getting money or keeping a job, making her ask for money, giving her an allowance, taking her money, not letting her know about or have access to family finances, etc. The opposite is ECONOMIC PARTNERSHIP: making money decisions together, making sure both partners benefit from financial arrangements.

USING MALE PRIVILEGE

Treating her like a servant, making all the big decisions, acting like the “master of the castle,” being the one to define men’s and women’s role. The opposite is SHARED RESPONSIBILITY, mutually agreeing on a fair distribution of work, making family decisions together.

USING CHILDREN

Making her feel guilty about the children, using the children to relay messages, using visitation to harass her, threatening to take the children away, etc. The opposite is RESPONSIBLE PARENTING: sharing parental responsibilities, being a positive nonviolent role model for the children.

MINIMIZING, DENYING, BLAMING

Making light of the abuse and not taking her concerns about it seriously, saying the abuse did not happen, shifting responsibility for abusive behaviour, saying she caused it, etc. The opposite is HONESTY AND ACCOUNTABILITY: accepting responsibility for self, acknowledging past use of violence, admitting being wrong, communicating openly and truthfully.

USING ISOLATION

Controlling what she does, who she sees and talks to, what she reads, where she goes, limiting her outside involvement, using jealousy to justify actions, etc. The opposite is TRUST AND SUPPORT: supporting her goals in life, respecting her right to her own feelings, friend’s activities and opinions.

Some women find these categories helpful to put labels on their feelings and experiences.

Why It Happens

A 27-year-old unemployed father took just 37 days to get re-arrested and charged with beating up his wife again. In his second round of charges he was accused of violently pushing his wife into some cupboards, throwing her to the ground and then threatening to kill her with a piece of broken glass.

If you asked this man for an explanation, he might say that it was her fault: she provoked him by nagging, complained about something, or insulted him. He might also focus on the situation, he was drunk, he was under stress because he lost his job, or the children were being noisy. Abusive men often excuse their actions by blaming the woman or citing situational factors. Abused women can respond by trying not to complain, worrying when he drinks, or panicking if the children make noise.

But the underlying cause of partner abuse is the man's need to control. This can be paired with an unwavering belief that he has the right to do so because of male privilege. Efforts by the women to be independent or challenge his authority may be matched with an escalation of the violence. He may have learned these attitudes during his childhood, perhaps by seeing his father abuse his mother, but it is orientation that is continually reinforced for him by the media, his friends, family, role models such as celebrities or sports figures, and even the law. Recognizing the power and control dynamic, you can see that violence is not solely a problem of dysfunctional families or a reaction to stress.

SOCIALIZATION OF GIRLS

Despite decades of effort to eliminate stereotypes of male and female roles, most little girls are still socialized to be nurturing, supportive, non-confrontational, and to put the needs of others over their own. Girls are exposed to messages that being male are better, women who have a man are better than women who do not, and women without a man should be pitied. In other words, women are taught to pacify, try and resolve conflict, defer to male authority (fathers, boy friends, husbands), and see a relationship as a necessary and valued commodity.

IMAGES OF MASCULINITY AND THE ROLE OF MEN

Little boys are socialized in quite a different way. It starts when they are babies and continues at school. Male aggression in the school yard is excused as healthy, for example. Boys are taught that being powerful and in control are good, thinking is better than feeling, and expressing feelings is bad. As adults, they may have difficulty appreciating the viewpoint of others. They may come to believe the man is the head of the household, a man should make more money than his wife, and his opinions are more important and so she should be submissive to his authority. A man can be threatened and feel vulnerable if he doubts if any of these sentiments applies to him.

VIOLENCE IN THE MEDIA

Stereotypes of male and female roles are repeated endlessly in movies and on television. They confirm the stereotype of men as aggressive and in control and the stereotypes of women as passive, submissive, sexually available, and eager to cater to the needs of men. Moreover, the multitude of media portrayals of violence against women are presented as normal, deserved and executed without consequence.

SOCIETAL ATTITUDES CONDONING VIOLENCE AGAINST WOMEN

Looking at portrayals of women in films and on television shows that we collectively see women as legitimate targets of violence. Surveys of average people lead us to the same conclusion. A high proportion of the population believes that there are circumstances when a man is justified in hitting a woman.

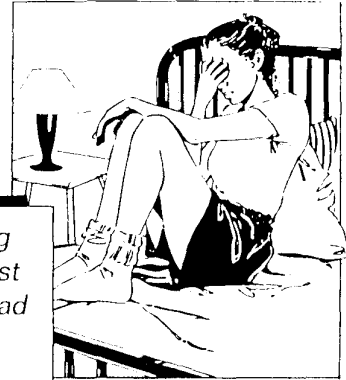
IN EQUALITY OF WOMEN

The Panel on Violence Against Women recognized all these factors and concluded that violence against women was "the consequence of social, economic and political inequality" of women. Women earn less money than men, their work is valued less and they do not have the same access to those who make the political decisions. Hitting your wife was once condoned by the law and, more recently; it has been seen as a private matter that should not involve the police. Abused women who sought help from authorities were often met with such comments as: "what did you do to make your husband so angry?" Society has taken violence against women seriously only in the last few years and that was because women worked extremely hard to place the issue on the national agenda.

We have violence in our society because we tolerate having violence in our society. The Panel on Violence Against Women recommended a Zero Tolerance Policy for violence.

Children Who Witness Partner Abuse

"One of the earliest experiences I remember is sleeping with my mother, and being thrown out of the bed against the wall while my mother was raped. That's how she had every one of us. I felt that the abuse was my fault, if I only did things better."



In a high percentage of families where there is partner abuse — much as 80% — the children witness violence against their mothers. Even if they do not see the abuse, chances are high that they know what is happening. And it is almost a certainty that the periods between the violent episodes which punctuate their lives will be filled with verbal abuse, threats and denigration of their mothers. Hundreds of thousands of children are exposed to violence and abuse in their homes and most will experience problems as a result, such as:

EMOTIONAL PROBLEMS

Children who are exposed to the abuse of their mothers can suffer from depression, anxiety, and anger. Symptoms may include nightmares, bedwetting, aggression and temper outbursts, irritability, moodiness, withdrawal from social activities, thoughts of suicide, and low self-esteem.

BEHAVIOURAL PROBLEMS

Children who are exposed to the abuse of their mothers, especially boys, may exhibit problem behaviours such as fighting with or bullying peers, non-compliance with adults, disrespect for authority figures such as teachers, or conduct disorders.

SCHOOL PROBLEMS

Children who are exposed to the abuse of their mothers may exhibit poor school performance or school avoidance. They may want to stay home to protect their mother or have difficulty concentrating on their work. The home environment may not be conducive to doing homework and they can suffer chronically from lack of sleep because of the violence.

HEALTH PROBLEMS

Children who are exposed to the abuse of their mothers may suffer from a higher rate of medical problems, as well as somatic symptoms such as headaches and stomach aches which have no medical cause. Babies may be excessively anxious and have problems sleeping or keeping food down. Abuse can affect the rate of growth of children. Children from violent homes have been found to be shorter.

INTERGENERATIONAL VIOLENCE

Boys who watch their mothers emotionally and physically abused may grow up to feel that all women should be treated that way. Girls may grow up to accept abuse in their lives with no appreciation of why life does not have to be that way. In other words, children who are exposed to violence in their homes are vulnerable to repeating the patterns modeled for them by their parents.

CRIMINALITY

Studies have shown that boys (and perhaps girls as well) who are exposed to family violence have an increased chance of involvement with the criminal justice system.

These consequences are found with children exposed to violence in their homes, regardless of whether they personally witnessed their mothers being assaulted. It should also be noted, however, that some children exposed to violence will appear to be 'perfect,' achieving high grades and excelling in sports or other activities. This is, in part, an expression of their futile hope that being a perfect child will stop the abuse at home.

Family violence is confusing for children. They love their father but are afraid of him and afraid for their mother's safety. They love their mother but don't understand why she cannot protect herself or them from harm. They rarely bring friends home. They learn to keep the family secrets and to see themselves as different from their school mates. Especially as they enter adolescence, the children may lose respect for the mother and resist her parental authority. Children from violent families often leave home at an early age. Surveys of homeless street youth often find high rates of family violence in their histories.

Child Abuse In Violent Families

Police say he juggled his 3-month-old baby in the air, then swung the infant by the arm over his head, slapped his 2-year-old daughter in the face, and struck his terrified wife in the back before she fled with the children.

It may not start right away, but partner abuse can escalate into child abuse as well. Estimates vary, but in 25% to 36% of families where the woman is assaulted, the children will also be physically abused by fathers, step-fathers or their mothers' boyfriends. Some research has shown that it is those abusive men who cause serious injury to their wives who are most likely to abuse the children. The more frequent the violent incidents against the mother, the more likely the children will be abused. A study reported in a 1996 issue of the scholarly journal *Child Abuse and Neglect* suggested that a man who has assaulted his wife at least 50 times will almost certainly assault the children as well. It has also been found that some physically abusive men assault the children on purpose to coerce reluctant mothers into compliance with their demands. Physically abusive men can also sexually abuse the children, usually the girls but sometimes the boys or both.

Obstacles To Leaving

"My husband struck me on our honeymoon. He killed our first child by kicking the four-month-old fetus out of the uterus. My doctor asked me what I had done to make him so mad, our Anglican minister reminded me that I had married for better or worse, the lawyer wanted to know where I would get the money to pay the legal fees, and my mother told him where I was hiding."

Why does she stay? This is perhaps the most frequently asked question in the area of partner violence. But there is no straight forward answer. There was a time when women were told by their mothers that leaving is the easy way out of a bad marriage. Stick it out and try to make things better. Where partner abuse is concerned, however, leaving is harder than most people imagine and it usually is harder than staying. For example, separation is the most dangerous period for an abused woman, when she is at highest risk for serious injury or even murder.

Most women say that if a partner ever hit them, they would take action immediately by leaving or ejecting him from the home. There are, undoubtedly, some cases where this happens. But an act of physical violence like that typically occurs after the woman has become emotionally invested in the relationship and against a backdrop of emotional abuse. A woman's self-esteem can fall as she internalizes the negatives messages about herself from the emotional abuse. I don't deserve to be happy. I will never be happy. The abuse is my fault. Any action she takes can be met with disapproval from the man: "the floor is never clean," "you clean the floor too often." Low self-esteem combined with this "damned if I do, damned if I don't" feeling can work against the likelihood that the woman will be able to take action. In other words, an abused woman is, by definition, affected by the consequences of partner abuse. This includes not only low self-esteem but also social isolation, anxiety, feelings of depression and worthlessness, health problems, and a profound sense of powerlessness to control her life. She is in a Catch-22: the consequences of abuse make it difficult to escape the consequences of abuse. She may drink too much or use other harmful coping strategies, have difficulty trusting people and even have problems keeping a job because of absenteeism. Without a job or the confidence that she can get one, she may be financially dependent on the abusive partner to feed and clothe her children. The best predictors of which women will remain in an abusive relationship are financial dependence, poor self-concept, and a history of witnessing violence in her family when young.

The many obstacles to leaving break down into three categories: HOPE, SHAME and FEAR. By the time her partner displays the first use of physical violence, the woman will probably have developed a deep sense of commitment to the relationship, fashioned a comfortable home, and had or be expecting children. In other words, there are emotional, familial and economic bonds that she will not sever lightly. There can be a period of optimism that the situation will change for the better. The woman may recognize negative aspects to the relationship but feels that the good outweighs the bad. She HOPES he will change, or she herself will change, or their situation will change and the abuse will stop.

THE CYCLE OF VIOLENCE

Some women remain optimistic about change because the violence they experience is part of a cycle. In their cases, a violent episode is followed soon after by his apology, admission of wrong doing, and promises that it will never happen again. This is sometimes called the "honeymoon phase." Based on his assurances, the woman HOPES it will not happen again and may keep the incident a secret. She may even spend a period of time in a shelter or transition house and decide to reconcile.

LOW SELF ESTEEM

A woman can mistakenly feel that the violence is being caused or triggered by her own actions. It would stop if only she lost weight, spent less money, or kept the house tidier. The effects of emotional abuse can be such that she readily sees herself as unlovable, worthless and deserving of abuse. Therefore, she HOPES the situation will improve if she herself improves.

BELIEF THAT THE CHILDREN NEED A FATHER AND ARE NOT AFFECTED

There are powerful messages in our society that children are better off in a two-parent home. Some women are willing to tolerate abusive behaviour for this reason. They may go to great lengths to conceal bruises from the children lest they lose respect for their father. She may compensate for his shortcomings as a parent by overly indulging the children. She HOPES that her children will benefit from having a father and not be affected in a negative way by the abuse she herself experiences.

SEEING THE PROBLEM AS ALCOHOLISM

As many as one third of abused women cite his alcohol use as the factor triggering most or all incidents. As researcher Holly Johnson, observed in her book *Dangerous Domains*, however, "alcohol provides battered women, who are desperate to understand why their partners hurt them the way they do, with an explanation for their husband's behaviour. It gives them HOPE that, if only the man would stop drinking, the violence would also stop."

A woman who is hoping for change may be protective of her partner, denying abuse, dismissing the concerns of others for her safety, or down playing the seriousness of the abuse, a technique called minimization. She may focus exclusively on the positive features of the man, or provide excuses to justify his behaviour to others. She may even misinterpret jealousy, possessiveness and control as indicators of his love for her.

Hope often fades. There can indeed be a violence-free period after an assault, but chances are that it will happen again. Some women report that the periods between the violent episodes get shorter over time. No matter what they do, they cannot control or stop the rages. Women who believe that the children are not affected may learn otherwise, as when a teenaged son assaults his mother or the school refers the children for counselling. The man may well stop drinking but the violence continues.

Although less true today than ever before, being abused by a partner is something many women are ashamed of and have difficulty admitting. Even after she labels her experiences as abusive, the SHAME may prevent her from publicly acknowledging her situation. She may feel it is her fault, for not being a better person or otherwise causing the abuse. Choruses of "I told you so" ring in her ears as she expects recriminations from the family over picking the wrong man. She may anticipate that her family will not be supportive or helpful when she tells them and she may not be aware of the services in her community where she can go for support and assistance.

Members of some ethnic communities may be especially ashamed of coming forward because of the embarrassment it could cause for themselves, the family and the community. Talking about personal problems with strangers can be an intensely difficult experience. They may also experience language barriers to reporting or bring distrust and fear of the police from their countries of origin.

The immediate consequence of being ashamed about the abuse is that the woman isolates herself and has no one to talk to or reach out to for help. This self-imposed isolation may be compounded by the abusive man's attempts to cut her off from her family and social network. She has no opportunity to hear from others the messages that might overcome her shame: abuse is wrong, it is not her fault, it need not be tolerated, and there is help available. Social isolation also increases her dependence on the abusive partner and lowers her self-esteem even further.

The third category of factors which work to prevent women from terminating violent relationships involves FEAR of the consequences.

FEAR OF DISBELIEF

This is especially likely when the man presents an image to the community of being respectable, happy-go-lucky, or law-abiding such as when he is an esteemed member of the church or a successful businessman. Wives of police officers may feel it is unlikely any report they make to the police will be believed. Those in abusive gay or lesbian relationships may also worry that their situation will not be understood.

FEAR OF POVERTY FOR THE CHILDREN

Especially if the woman is financially dependent on the abusive partner, but also true in other cases, she may dread the consequences of a lowered standard of living for herself and her children. The need to move to cheaper accommodation will probably necessitate a change of schools for the children, a disruption at a time the children would benefit most from stability. Well over half of single mothers live in poverty. Social assistance is unlikely to keep a family above the poverty line, nor will a minimum wage job.

FEAR OF REPRISAL

An abused woman may have good reason to believe that any attempt to end the relationship will be met with reprisal. Her partner may have told her this on many occasions: if I can't have you, no one can; if you leave me I will kill you; if you leave me I will kill your parents; if you leave me I will kill the children. If she has tried to leave before, she may already have experienced an escalation in the violence and may, ironically, have reconciled in an effort to be safer.

FEAR OF LOSING CUSTODY OF THE CHILDREN

Again, this concern can be the result of the man's repeated messages about the consequences of leaving. It can and does happen that men with determination or endless financial means can battle in the courts for years and perhaps be successful. In these cases, the man is using the custody battle as a means of power and control. Some men threaten to report the woman as an unfit mother to child protection authorities and she may worry that her children will be apprehended from her.

FEAR FOR THE CHILDREN'S SAFETY ON ACCESS VISITS

If a man is abusive to her children, a woman may feel that her ability to protect them is better if she stays in the relationship so she can supervise his contact with the children.

FEAR OF OFFENDING RELIGIOUS PRINCIPLES

Some religions prohibit divorce or prevent women from being the party who requests it. Even those who are not religious are exposed to messages such as marriage vows are forever, till death do us part, etc.

FEAR OF BRINGING SHAME ON CULTURAL COMMUNITY

Some women can find safety and sanctuary within the protective bonds of their cultural community. Those who are being abused, however, may be deterred from leaving for fear of offending culturally-prescribed norms of feminine behaviour or challenging male authority.

The Violence Against Women Survey found that 70% of women in violent relationships left at least once and returned. The most common reasons given for reconciliation were "for the sake of the children" (31 %), to give the relationship another try (24%), the man had promised to change (17%) and a lack of financial resources and options (9%). Women's groups have been critical of recent cuts to social assistance benefits in part because they mean more women are going back to, or staying in, abusive relationships because of financial dependency.

Studies show that abuse continues after separation in about one in five cases, taking the form of assaults, rape, stalking, misuse of joint credit, or breaking and entering her new residence. Where abuse continues after separation, it escalates in severity in one third of cases. A

woman's chance of being murdered by an ex-spouse is six times greater than murder by a spouse with whom she is living. In 1995, statistics reported that 23% of legally-married women killed by their husbands were separated at the time.

If You Are Abused: Where To Call For Assistance

He decides to treat you the way he does. It's his choice. He has to take responsibility for his behaviour. If you refuse to let him treat you badly, it doesn't mean you don't love him. (Advisory Council on the Status of Women - U.S.A.)

Remember, if you are in an abusive relationship:

- you are not alone
- it is not your fault
- nothing you do or say ever gives anyone the right to abuse you
- you have the right to feel safe
- you can make it stop
- it is okay to ask for help

There are people in most communities who can help you sort out your options, protect yourself from further abuse, provide transitional and second-stage housing and help you with legal matters.

In an emergency situation, call the police. They have the authority to arrest your partner and it should be he who leaves the home rather than you and your children. If you must leave quickly to maintain your safety, however, you should do so. If you do not have friends and family members with whom you can stay, there is probably a shelter, transition house or safe house in your area. If you feel you might one day be in need of such a place, it is best to investigate the local options right away, just in case.

There are over 40 transition houses and shelters across the country. Look on page 1 of your local telephone directory to find emergency numbers such as the abused women's helpline or the crisis line in your area. They can direct you to the shelter or service closest to where you are.

Most shelters or transition houses have programs or services for children who have been exposed to partner abuse. They typically offer support groups or advocacy for non-residents or former residents, or can refer you to an agency that does.

Calling The Police

Most forms of partner abuse are criminal offences: assault, sexual assault, intimidation,



stalking (called criminal harassment), forcible confinement, threats, etc. It is your right to call the police if you are the victim of a crime. Talk to the staff at your local shelter or abused women's support agency to learn about the advantages and disadvantages of calling the police. When the police lay charges or arrest abusive men, the probability of new incidents of violence is reduced to half.

If you watch American television programs, you might believe that it is up to the complainant to decide if charges will be laid. In the case of partner abuse, that did indeed used to be true. It no longer is. The police decide when charges are justified. If you call the police, and they have a "reasonable" belief that a crime was committed, they are supposed to lay charges. If they arrest your partner, however, do not expect that he will be held in custody for more than 24 hours (although there is a remote possibility in some cases, particularly if he has outstanding warrants). Ask the police to notify you of his release or at least to estimate how long it will be before he is released.

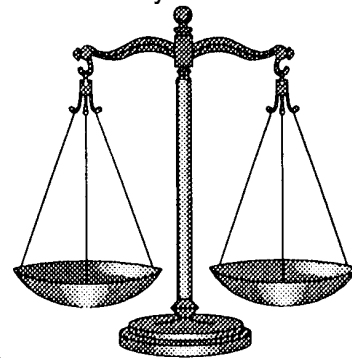
Victim/Witness Assistance

If charges are laid and your partner pleads not guilty, the case will go to trial. This means you will probably have to testify. Services are available in most parts to help victims and witnesses who are expected to testify in court. Priority is given to partner abuse and child abuse cases. You will find that the victim service workers understand how difficult it is to testify in court. They will explain the legal process, provide moral support and debriefing about testifying, and can refer you to agencies in your communities for counselling, legal advice or housing.

There are too many victim service agencies to mention in this little book. Ask at your local police department or courthouse to be directed to the program closest to you.

Other Legal Options

There are some other legal options available to women abused by their partners, especially if they have left and are being harassed, stalked or continue to fear retaliation. They all can be difficult to enforce.



Because their effectiveness in keeping you safe is not guaranteed and you should still engage in safety planning, as discussed below. And none of these options is suited to crisis intervention in an emergency.

PEACE BONDS

If you have "reasonable grounds" to fear an ex-partner will cause "personal injury" to you or your child, you can apply for a peace bond under s. 810 of the Criminal Code. The person named in the order must "keep the peace and be of good behaviour" and agree to abide by conditions set by the judge (e.g., stay a certain radius away or not possess firearms). Violating a condition is a criminal offence and your partner may be charged if the police learn of his actions. Consult the police or your local women's advocacy agency to learn how to apply for a peace bond.

If you get a peace bond, keep the documentation readily available to show the police if you have to report a breach of the conditions (although the existence of a peace bond should be recorded in their computer systems).

RESTRAINING ORDER

Where a spouse or parent poses a risk to the family, a civil restraining order may be granted by a Family Court. This is most commonly done when the parties are already involved with the Family Court because of a divorce petition or a custody or access dispute. You will need a lawyer to get a civil restraining order but you might be able to qualify for legal aid or use a legal clinic.

If you get a restraining order, keep the documentation readily available in case you have to call the police. The existence of such an order will probably not be registered in their computer systems unless your lawyer tells them about the order.

PRE-COURT CONDITIONS OF NON-ASSOCIATION

One of the advantages of having charges laid is that, until the court case is over, there will be legal restrictions on your partners contact with you or any person who might be a trial witness. (He might be remanded in custody, but this is rare.) Ask the police what his "bail" conditions are and find out what to do if he violates them. In some cases, violating a release condition is itself a criminal offence. Committing a new offence while on "bail" may be grounds to have his bail revoked.

ENFORCEMENT OF POST-COURT NO-CONTACT RESTRICTIONS

After court, if your ex-partner has been imprisoned or placed on probation, there may well be legal restrictions placed on his contact with you as part of his conditions of any temporary absence (i.e., pass from prison), parole or probation. If he breaches that restriction, call the police so they can report it to the proper authorities or tell you how to do so. Breaching a probation condition is itself a criminal offence. Breaching a condition or parole can mean that his parole will be ended.

Remember, if you feel you are in danger, legal protections such as these may not be enough. You should also develop a safety plan.

Safety Planning

"I have this feeling, I'm sure, that I'm going to be one of the women that you read about in the newspaper after she's murdered."

Your local women's shelter or advocacy group can help you devise a safety plan for what to do and where to go if you are in danger or have to leave home quickly. This is a sensible course of action for women both before and after separation. Your plan should involve taking the children if at all possible if you have to leave your residence in a hurry. Depending upon their ages and understanding of the situation, you should consider telling your children about the specific aspects of the plan.

Decide in advance the options you have for places to stay (relative, neighbour, friend, motel, shelter). Other aspects of your safety plan might include these:

PLAN ESCAPE ROUTES OUT OF YOUR RESIDENCE

As you should do as a precaution in case of a fire in your residence, know how to leave if access to the door is blocked.

KEEP THE CAR READY IN CASE OF EMERGENCY

Make sure the car always has gas and is in good repair. Hide a set of car keys somewhere outside in case you have to leave in a hurry.

KEEP SOME MONEY HIDDEN

Have enough money on hand to pay for a taxi and any immediate expenses you might be able to anticipate.

PACK AN EMERGENCY BAG

Have a bag ready in case you need to leave quickly. This would contain personal care items and a change of clothes, toys and valued items for the children, any medication, as well as identification, health card numbers, and important papers (especially court papers regarding custody of the children, birth certificates, peace bonds or a restraining order). Try and get the children's passports if you worry he might take them out of the country. You can leave the bag with a neighbour or friend if it is not safe to keep at home.

AGREE UPON A CODE WORD WITH A TRUSTED FRIEND OR RELATIVE

Use of this code word in a telephone conversation will alert your confidant of trouble and that you need assistance or the police.

KEEP EMERGENCY TELEPHONE NUMBERS ACCESSIBLE

Have emergency numbers posted near each telephone so you or your children can dial them in a hurry. If your telephone is so equipped, program emergency numbers into the speed dialer. Teach the children how to use this feature as well.

Some Questions And Answers

AREN'T MEN EVER ABUSED BY FEMALE PARTNERS?

Yes. Many men who claim to be abused are really batterers who are assaulted by women as they defend themselves and their children. Seeing the woman as the aggressor is one way they rationalize their assaultive behaviour. However, it is estimated that the victim is a man in about ten percent of partner abuse cases. "Husband battering" may seem to be a rare phenomenon because men are reluctant to come forward and acknowledge a violent relationship. They may also be less in need of assistance and so go unnoticed by social service agencies, or less likely to be injured and present themselves for treatment at hospitals. But there is good reason to believe that men experience partner abuse at a far lower rate than women. Not only are men physically bigger than women, but women are rarely socialized to use power and control in interpersonal relationships.

Even when they are abused, men are generally in a better position, socially and economically, to leave a relationship. They are more likely to be employed and probably have a higher annual salary than their female partners. Studies of divorce show that the standard of living of the male partner usually rises after separation. Nevertheless, men who are abused by female partners should feel able to get assistance and there are a growing number of men's groups which are filling this void.

CAN ABUSIVE MEN BENEFIT FROM COUNSELLING?

Yes. There are many treatment programs for abusive men, well over 1 00 and the number is growing. Some are better than others and some men benefit more than others. It is clear that men gain little or no insight from repeated incarceration so counselling may i.e. the best option. Unfortunately, many men enter treatment because they are forced to by the courts. Success is

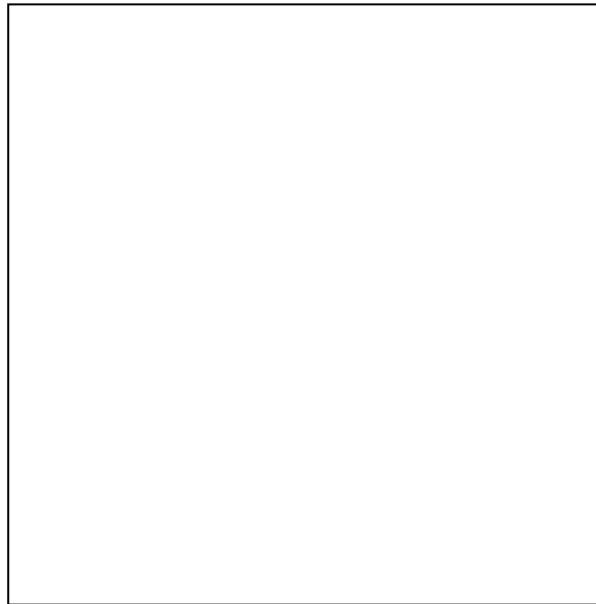
more likely when the man has realized that his attitudes and behaviour are a problem and sincerely wants to learn new ways of relating to women.

Programs which examine the underlying power and control dynamic of partner abuse may well be more effective than those which focus solely on anger management or substance abuse. Abusive men must learn to verbalize their frustrations rather than act them out in rages. They have to accept the responsibility for their own mistakes and be accountable for their behaviour.

WHAT SHOULD I DO IF I SUSPECT A FRIEND IS BEING ABUSED?

Abused women are often cut off from social supports and have poor self-esteem. Encourage her to see you as an understanding friend and counteract the negative messages she hears at home by helping her to feel better about herself. If she is able to tell you about what is happening, recognize how difficult that was for her. Be a good listener and be prepared that any changes she makes in her life will probably not happen quickly. Don't judge her and don't blame her or tell her what she has to do. Reinforce that she is not to blame, does not deserve the abuse, and can find people who will help. Find the telephone numbers of local support resources and help her to generate options and to identify the advantages and disadvantages of each.

If you have any reason to feel that her children are at risk for abuse, you must contact the local child protection agency (as discussed in the section of this booklet on Child Abuse).



Elder Abuse

"Families will come into emergency with an elderly person and say 'I will not take this person home.' And that's it, they walk out the door. Or it's 'I'm just going to park the car' — and you never see them again."
(Hospital Social Worker - U.S.A.)



For most people, retirement is eagerly-anticipated, an enjoyable time of life when they are free to travel, indulge neglected interests, and spoil grandchildren. For others, the senior years are a time of dependency, depression, chronic illness, isolation and poverty. These factors can leave the elderly vulnerable to exploitation and abuse or make it more difficult for them to access assistance.

Elder abuse is hidden from view, behind closed doors. In a 1992 issue of the *Journal of Elder Abuse and Neglect*, Professor Podnieks of the Ryerson School of Nursing reported the results of a national survey. She and her colleagues estimated that almost 100,000 seniors living at home had been abused in one of four ways since turning 65. Specifically, they had been financially exploited, emotionally abused, physically abused, or neglected. That figure represents 4% of seniors: one in every 25 people who are 65 and older.

Seniors can be abused by spouses, adult children, other relatives, neighbours, paid caregivers, or unscrupulous business people. A 1995 analysis of 542 cases of elder abuse found that a son was the most common perpetrator of elder abuse (27%), followed by spouses (24%) and daughters (11%). Elder abuse occurs in all areas of the country, both in cities and in rural areas. Unlike partner abuse, it affects men and women equally. Many incidents — perhaps most — go unreported.

By the turn of the century, there will be 3.5 million who are 65 years of age or older, in Canada, one in every ten people. Moreover, 1.5 million will be 75 and over, and two thirds of them will be women. These figures reflect a dramatic increase in both the number of seniors and their relative proportion in the general population, increases which will continue well into the 21st century. As the number of seniors in the population rises, so too will the need to address elder abuse.

Financial Exploitation

The woman's alcoholic daughter called to tell [hospital] staff not to pay attention to anything she said because "she just likes making a fuss." "She kept insisting her mother had to be let out by Friday. This was really important to her. Then we realized that was when the pension cheque came in." (Geriatric Social Worker)

A person financially exploits or abuses a senior citizen when they illegally or inappropriately use a person's resources for their own profit or advantage. Seniors may be pressured to relinquish control over finances, sign over power of attorney, hand over money, sign over ownership of a house or cottage, sell property or possessions at reduced value, or include the abuser in a will. This pressure may take the form of threats of institutionalization or withdrawal of care or attention. Their money or property may simply be stolen or their own money may be withheld from them. Some seniors are vulnerable to exploitation by unscrupulous trade's people and sales people who charge exorbitant rates for goods or services or convince them to purchase goods and services which are not needed.

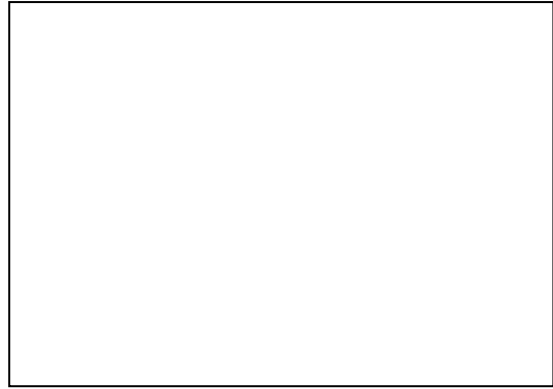
Professor Podnieks's survey suggested that financial exploitation was the most common type of elder abuse, affecting 60,000 people, or 2.5% of seniors who live at home. Victims were equally divided between males and females. About one third of respondents who acknowledged being the victims of financial exploitation identified the perpetrator as an adult son or daughter. About one quarter was other relatives, such as nieces, nephews or grandchildren. Victims of financial exploitation are often widows who live alone.

Emotional Abuse

"Many of the ladies have had disturbed marriages and the children may be a reflection of that. The kids seem not to be fully functioning adults. But still you hear, 'I'd rather see my daughter even though she's always yelling at me'." (Geriatric Social Worker)

Any course of action producing mental or emotional distress can be emotional or psychological abuse. Emotional abuse can involve verbal assaults in the form of humiliation, intimidation, or infantilization (treating the senior like a child). Repeated threats of placement in a nursing home, isolation or denial of care can also be abusive, as can mental cruelty, deprivation of attention or affection, or inappropriate control over an individual's choices and the right to make decisions.

Professor Pocinieks estimated that 34,000 seniors, 1.4% of the senior population, are sworn at, insulted or threatened at least ten times a year. Those who reported such abuse were equally likely to be men or women and the abuser was likely a spouse. Victims are often married to the abuser or living with an adult child and they tend to blame themselves for the abuse.



Physical Abuse

She was married for 50 years to a verbally abusive man who expressed controlling behaviour toward the family and had sole control of the finances. He attempted to hit her on many occasions, and did strike her when she was older. The husband developed dementia in his later years, and all his negative characteristics came to the fore. He couldn't control his temper. On one occasion, he pushed her to the floor, resulting in permanent injury to a weak hip (An account of elder abuse told to the Panel on Violence Against Women)

Spousal abuse can begin in old age or it can worsen during the senior years because of factors such as the onset of dementia in abusers, increased social isolation, or an increase in life stresses. More commonly, the physical abuse experienced by elderly women is a continuation of long-term patterns of spousal violence. The elderly can also be vulnerable to abuse by caretakers including adult children. Physical abuse of the elderly is the intentional and non-therapeutic infliction of physical pain or injury. It can involve hitting, slapping, grabbing, pushing, burning, sexual mistreatment, physical restraint or physical coercion.

Physical abuse affects at least 0.5% of seniors at home, an estimated 12,000. About one quarter of respondents to Professor Podnieks's survey said that the physical abuse they experienced necessitated medical attention at least once. In the majority of cases, the abuser was a spouse.

Neglect

"Often it's the least capable child who's left to look after a parent, the one who never really grew up, found a job, learned to cook. They have no idea how to do it."

Neglect of the elderly can take the form of intentional or non intentional withholding of food, medication, clothing, hygiene, housing, or medical care. The elderly may be left in unsafe places or left alone for lengthy periods. Neglect can be active, if it is done on purpose, or neglect can be passive, the result perhaps of poor communication or failure to recognize the

needs of the elderly person. Neglected elders are often widows with health conditions that limit their activities and who have few social supports. It is estimated that at least 0.4% of seniors at home are neglected.

Why It Happens

"We have interviewed people who were beaten for 60 years of life, first by a parent, then by the husband, and then by the son." (Elizabeth Pittaway, University of Victoria)

Elder abuse by family members has been linked by researchers to a variety of factors.

CONTINUATION OF SPOUSAL ABUSE

If a marriage has been characterized by abuse — be that emotional, sexual or physical there is no reason to believe that this pattern will be disturbed simply with the passage of time. Indeed, spousal abuse may escalate in frequency and severity in the senior years.

REPLICATION OF CHILD ABUSE

Parents who abused their children when young could be at higher risk than average of abuse by their adult children. The reason is not entirely clear but it could be that the children never learned healthy coping strategies to deal with the stresses often experienced by caregivers. As the parents of young children, the seniors responded to caregiver stress with abuse and so the adult children do the same. In any event, this type of abuse reflects long- term family problems and unresolved parent/child conflicts.

INTERDEPENDENCIES

As one might expect, victims of elder abuse can be dependent on their abusers, perhaps financially or for personal care. The situation is often reversed however. Research has shown that abusers are often financially dependent upon the elderly people they victimize. Resentments and feelings of inadequacy can sometimes manifest themselves in abuse.

STRESS

Caring for aging relatives can be stressful if their needs are demanding and unrelenting. The label "sandwich generation" describes those who care for both their own young children and their elderly parents, compounding the stress. The vast majority of family caregivers execute their responsibilities without resorting to abuse. Nevertheless, some experts see caregiver stress as a common cause of elder abuse, especially if the caregiver is experiencing other life stresses such as financial or marital problems and has no effective social support network. Abusive caregivers may feel overwhelmed by the responsibility, resentful, angry, and trapped in a daily grind of tasks for which there is no predictable end. Especially as the mental and physical capacity of the senior wanes over time, frustration can build to the point where some caregivers become emotionally and physically abusive.

PERSONALITY OF THE ABUSER

Research has shown that abusers of the elderly are often dependent on drugs or alcohol, so they may generally use inappropriate coping strategies for problems and stress in their lives. Abusers of the elderly may be mentally ill, developmentally delayed, or be experiencing dementia and do not consciously intend to inflict the injuries they do.

ATTITUDES TOWARD THE ELDERLY

Those who advocate for seniors point out that ageist stereotypes are common in our society. Some people see seniors in a negative light, as slow, useless, unattractive or unintelligent. Such attitudes may make it easier for abusers to rationalize and legitimize their actions toward the elderly (e.g., she doesn't care if she is only bathed once a week). Some seniors will also internalize these negative messages and see themselves as undeserving of assistance or respect.

THE SOCIAL AND ECONOMIC VULNERABILITY OF SENIORS

Some seniors retire in comfort and can afford adequate housing and the purchase of the support services that are increasingly necessary as they grow older. Many, however, live in poverty, especially true of women. Some seniors have supportive families upon whom to rely for assistance. Others are alone. Social and economic marginality can leave the elderly vulnerable to abuse by having to rely unduly on people who take advantage of them or who are not appropriate caregivers.

Why Elder Abuse Goes Unreported

*"The victims don't call [the police] because, come the next day, they're afraid they will have no one to look after them, they're afraid of reprisal or of being institutionalized, and they prefer the abuse to that."
(Police Constable)*

Seniors may be unwilling or reluctant to report abuse for any or all of the reasons already addressed in this booklet, including self-blame, shame and financial dependency, fear of disbelief, fear of reprisal, social isolation, or being unaware of support resources. They may have been disempowered from making decisions by years of verbal abuse and messages of their worthlessness. Or they may distrust the police and the criminal justice system if they encountered an unhelpful response to a previous attempt to report. They may have adopted defensive coping strategies such as seeing the abuse as normal, minimizing its negative impact, or drinking to dull the pain. As with women of all ages, some face obstacles to reporting such as language barriers or distrust of authorities brought from countries of origin. Rural and northern women will probably not have access to the range of resources available in cities.

These reasons which can prevent reporting in all cases of family violence are joined by others especially relevant to seniors. Members of older generations of women may have been imbued strongly with the sentiment of "till death do us part" or hold a religious bias against divorce. They may have been socialized to be submissive to the authority of men, to accept abusive behaviour as an unfortunate but normal part of marriage, to perceive inadequacies within themselves as the cause of the abuse, or to try and change their own behaviour in an attempt to prevent recurrences of abuse. Such patterns of thought and behaviour may have developed well before family violence became a public issue in the 1960s and 1970s.

The elderly may be less likely to know a friend or family member who came forward to acknowledge a violent relationship. Neither do they see women of their generation reflected in media campaigns or pamphlet literature on family violence. Their symptoms of depression, hopelessness and despair may have long-ago been mislabeled as psychiatric problems, before there was widespread understanding among helping professionals of domestic violence. They may even have attempted to get help in the past, only to be met with disbelief or blame.

And while social isolation is a factor common to many people who experience family violence, it may be especially acute in the case of elder abuse.

Researchers have identified a variety of factors which work to prevent the elderly from contacting the authorities about caregiver abuse. Fear of institutionalization or abandonment is key. Poor health or a physical handicap may leave an elderly person entirely dependent on an abusive family member for personal care or companionship. They may also be financially dependent on the abuser. Risk for caretaker abuse may rise as the senior gets older, at the same time that dependency is increasing. The arrest or alienation of the abuser could trigger the end to the senior's independent living, a fact which might discourage the senior from complaining to the authorities. Finally, communication disabilities may prevent some seniors from accessing assistance.

What To Do If You Suspect An Elderly Person Is A Victim Of Abuse

Service providers are often faced with the dilemma of maintaining a delicate balance between the client's desire for autonomy and the community's interest in protecting its citizens. An individual's right to live at risk and refuse intervention must be respected (Elder Abuse: A Practical Handbook for Service Providers)

If you know a senior who is in danger or at risk of serious harm, call the police immediately. In all other cases where you have a reasonable belief that an elderly person is being abused, your response may depend in great part on the degree to which the person is capable of recognizing their own plight and seeking help for themselves. Existing laws are premised on the belief that seniors have the right to choose how to live their lives as long as they are not harming others. The law also assumes that adults are mentally competent to make their own decisions unless it is legally proven otherwise. Authorities can offer assistance but abused seniors can refuse that help, as long as they are capable of understanding the available options and deciding from among them.

No matter how well-meaning, to take away a senior's right to make their own decisions would be to treat them like children. It may be the person's conscious choice not to report, based on a thoughtful consideration of the consequences of reporting. For example, laws in some areas do not protect abused seniors from being removed from their homes for their own safety while the abusers remain in the home. Unlike child abuse, reporting of elder abuse is not mandatory in most areas, unless the abuse is taking place in a nursing home, hospital or other similar facility.

If you suspect a mentally capable senior is being abused, you can help them best by focusing on the causes of the abuse and the impediments they face in making the decision to take action about the abuse. Break their isolation, validate their right to find the abuse unacceptable, and lessen their vulnerability. For example, connect them with seniors' groups and a support network, explore alternate housing options or arrange for a visiting nurse or other in-home care to monitor the situation.

Point out that the abusive behaviour need not be tolerated. For some people, it could be the first time they have heard that message. Adopt a non-blaming approach, however, and be kind, supportive, and respectful. Provide information about elder abuse, the available legal options and the telephone numbers of local resources. Or, with their permission, you can advise the family of your concerns and/or call the police.

Sometimes the best course of action is to assist the abuser. Arrange respite for stressed caregivers and connect them with support (e.g., the Alzheimer's Society understands the situation of those providing care to Alzheimer's sufferers). Some abusive caregivers will benefit from therapy, addiction counselling or training in life skills and emotionally-healthy coping strategies. Securing them independent housing may also help in some cases.

If You Are Abused

I think it was during my second last hospitalization [for physical injuries] my psychiatrist ... asked me if there was anywhere else I could go for a few months when I left the hospital. I think [my husband] knew something was wrong. I did go to my sister's for a couple of weeks but then I had to go back home. Things were worse than ever (The story of "Eve")

At the age of 75, after almost 50 years of marriage, "Eve" did leave her abusive husband, with the help and encouragement of a VON home-care nurse who recognized the abuse. Eve stayed for a while in a shelter for abused women where they helped her move into a retirement residence. The transition has not always been easy. As with many women in her situation, Eve had never dealt with financial matters such as banking, taxes, or pensions. She had to go to court to get an equitable division of the marital assets so she could pay her living expenses. But she found support and assistance in these and other tasks. If you are an abused senior, you can get assistance. The first step is to make sure someone knows about your situation.

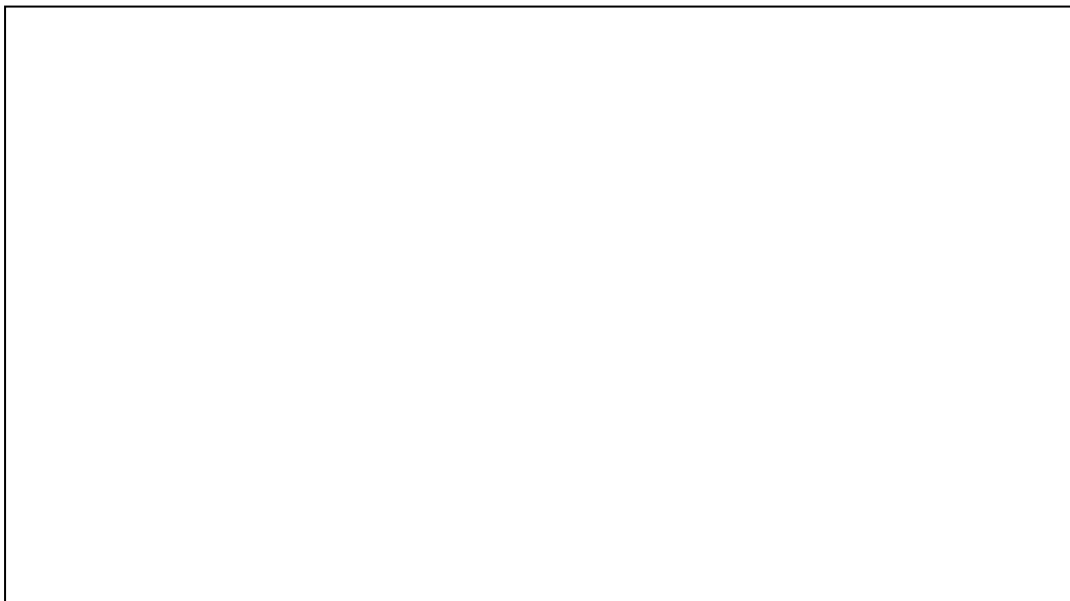
Victims And Caregivers: Where To Go For Information

Seniors, caregivers and concerned relatives and friends can find information and referrals from a variety of sources:

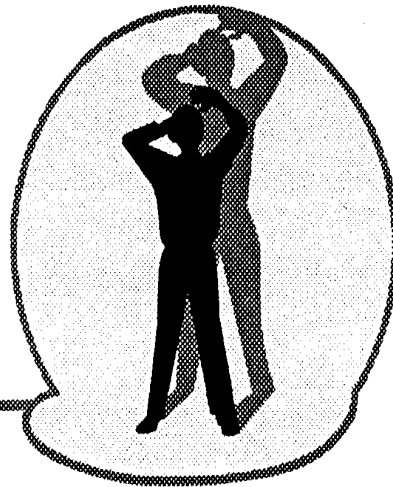
- the staff of your local seniors centre can refer you to someone who can answer your questions or provide assistance
- your physician or other health care providers are trained to respond to elder abuse
- public health departments are familiar both with the issue of elder abuse and with the local resources
- someone at your church or place of worship may be able to offer support and suggest ways to help
- libraries have information booklets and pamphlets on elder abuse
- local women's shelters or transition houses understand the dynamics of family violence and can help with support and referrals

- the office of the Attorney General or the Ombudsman can help you understand the laws of your area concerning the protection of mentally incapable adults and they may be able to intervene to prevent further financial abuse

If your concern involves spousal abuse of a senior, any of the sources listed in the section on partner abuse can also provide formation and/or referral. In an emergency situation, call the Police an abused women s hotline, or your local distress or crisis helpline (look on page 1 of your telephone directory for the numbers).



Sexual Offences



Rape

Rape occurs whenever a male person ("the accused") has sexual intercourse with another person ("the complainant"):(

1. Without the consent of the complainant or is reckless as to whether she consents. For example, thinking that her "NO" actually means "YES".
2. With consent where the consent:
 - a) is extorted by threat or fear of bodily harm to the complainant or to another;
 - b) is obtained by false or fraudulent representations as to the nature of the intercourse;
 - c) is obtained by personating someone else;
 - d) is obtained by unlawfully detaining the complainant.

CAN A HUSBAND RAPE HIS WIFE?

Yes. Act 31 of 2000 removed the conjugal rights of a husband absolutely, and thereby making sexual assault by a husband in certain circumstances irrelevant. Therefore, all males whether married or unmarried, are guilty of rape whenever they have sexual intercourse with another person without her consent.

THE NATURE OF THE CRIME

Rape is a crime of violence, not a crime of love or passion.

Victims never ask to be raped, and their demeanour, manner of dress, or their sexual activities must never be used to justify this act. The law holds that even a prostitute can be raped. Once a victim does not consent, e.g., saying NO, running away, struggling, crying and other forms of active or passive resistance; it is a crime for a man to have sexual intercourse with her.

The nature of the relationship between the parties does not matter e.g. engaged persons, friends, etc. The slightest penetration of the vagina by the penis is an act of sexual intercourse, even if there is no ejaculation.

► VICTIMS AND ASSAILANTS

There are no special characteristics to rape victims or the perpetrators. Old, young, rich, poor, able and infirm, can equally be victims/perpetrators. However, by law, a boy under the age of 14 years is deemed incapable of committing rape. In light of changing societal conditions and child development, it may be necessary to review this position.



WAYS TO AVOID BEING ATTACKED AT HOME.

- Ensure that your home is equipped with good locks and bolts.
- Never leave doors and windows unsecured particularly at ground level. Strangers may barge into your home.
- Avoid sleeping with doors and/or windows open.
- Never go outside alone to check on strange sounds. Secure the premises and call police, friends/relatives.
- Be sure that strangers e.g. meter men are properly screened and identified before letting them enter your home. Even be careful with casual acquaintances.

OUT OF THE HOME.

- Don't ask strangers for directions; find a police officer, or other official.
- Avoid dark or unfamiliar places, especially when alone.
- Avoid going out alone, especially at night. Go with friends.
- Walk with a phone card or other means of making calls e.g. cellular phone.
- Always walk in a manner which allows you to face oncoming traffic.
- Always be alert and notice strange persons who may be watching/following you.
- Never hitch-hike. This is particularly dangerous.

AT PARTIES:

- When attending functions, arrange transportation to take you there and back beforehand, and where you will be picked up.
- Always let someone know your
- Always get your own drinks, and observe how it is being prepared.
- Don't leave your drinks unattended, someone may spike it.
- Never get drunk, this retards your assessment and reaction.



CAR SAFETY:

- Never park your car in unlit/deserted areas.
- Always know exactly where it is parked, and have your keys ready when you approach it.
- Check the interior of your car before entering.
- Always drive with doors locked and windows up, if possible.
- Never pick up hitch-hikers.
- Keep your vehicle properly maintained, and ensure that it has fuel, a spare wheel, and a jack.

- If you suspect that you are being followed don't drive home. Drive straight to the nearest police station or safe area.
- If you get a flat tire in an unsafe area, drive to a more secure location. It is better to lose a tire than to be attacked.

GENERAL:

- Walk with personal alarm devices, such as whistles and sirens. Remember that mace and pepper spray are both illegal in Trinidad and Tobago.
- Get self defence training.
- Always be alert and aware of your surroundings.

WHAT TO DO IF CONFRONTED

- Run away and raise an alarm if possible.
- Set off any personal alarm systems that you carry.
- Do not struggle with an armed attacker; he may not hesitate to injure you.
- If the attacker is unarmed, you may be able to ward him off or raise an alarm e.g. screaming "fire" or "police".
- Try to stay calm and avoid doing anything to set off a violent assailant. Never insult or berate him.
- Plead with your assailant and try to talk him out of it. Try to let him see you as a person and not a sexual object.
- If all else fails, tell him that you have your period, or that you have a serious contagious disease. Urinating or excreting on yourself might also turn off an attacker.
- Pay particular attention to the physical characteristics, clothing, and general condition of the assailant. This is very important for later identification.
- Report all attacks to the police, even if it did not result in an actual rape.

SOME DOS AND DON'TS FOR VICTIMS

Despite the best precautions, some women still become victims of rape. Men who rape make the decision to do so and will generally choose the time and place. The following advice should be followed by victims. Some of them may appear repulsive to some victims, but they are necessary to preserve evidence, and identify and convict the assailant.

DO:

- Call for the police and/or other help immediately.
- Make sure and secure your home, or get away from the place of attack to a place of safety.
- try to keep as warm as possible.
- Make a report to the police, even if you do not intend to follow up on it. This may save another person from a similar attack.
- Seek medical attention as soon as possible. Once the police investigate they will take you to the nearest doctor or hospital for an examination. This should confirm injury, and the fact that intercourse took place. Follow-up tests are important to determine disease and/or pregnancy from the attack.

DO NOT:

- Bathe or rinse your mouth.
- Wash or change the clothes worn during the attack.
- Straighten or interfere with anything in the room or other crime scene.
- Drink alcohol or take drugs.
- Stay in the place of attack if it remains unsafe.

EFFECTS OF RAPE ON THE VICTIM

The effects of a sexual attack often increase after the incident. The victim will exhibit physical, emotional, and behavioural characteristics which will take time and effort to overcome; some may never go away. The reactions may be different depending on the victim.

PHYSICAL:

- Injuries received in the attack, e.g. wounds, fractures.
- Recovery being drugged or chloroformed.
- Possible pregnancy, or infectious diseases.
- Inability to sleep, or sleeping too much.
- Rashes, diarrhea, or overall illness.

BEHAVIOURAL CHANGES:

- Lack of interest in appearance, or preoccupation with appearance.
- Crying or hysteria.
- Eating too much or too little.
- Radical mood swings, e.g. anger, guilt, depression.
- Talk of suicide, or attempting suicide.
- Prone to accidents.
- Sexual promiscuity, or sexual avoidance.
- Fall in work standards and lack of concentration.
- Seclusion from people, and not trusting anyone.
- Difficult to communicate with.
- Generally impulsive and unpredictable behaviour, e.g. drinking alcohol, taking drugs, getting into fights.
- Avoid being touched or kissed especially by men.

EMOTIONAL DISTRESS:

Victims may blame themselves for the attack, e.g. "I should have fought harder", "Good girls don't get raped", "I wish I was dead, because I'm no good to anyone now". Others blame God "There is no God, because he wouldn't let this happen to me". Some will blame men in general "I hate men, they are all animals".

Such emotional disturbances often create many fears and phobias in victims that make them very anti-social. These fears are all real to the victim, even if to an objective person they appear to be unfounded.

- Fear of being left alone, or being in secluded or poorly lit areas.
- Seeing a man who resembles the attacker.
- Odours associated with the attack, e.g. alcohol, cologne, or perspiration.
- Fear of associating with people, because they feel that everyone knows and is laughing at them.
- Fear of certain sounds which were previously ignored.
- A general fear of people.

RESPONSES TO THE ATTACK

FAMILY AND FRIENDS:

They are also victims because they must interact with the person assaulted, and may themselves need support and assistance in coping with the aftermath. Some of the effects are as follows:



- Blaming response. They often will blame the victim and/or each other, out of their inability to deal with their frustration.
- Keeping an impossible secret. They will deny the assault, even when the facts are known to others. This leads to increased isolation and loneliness because the victim is forced to live this lie.
- The silent conspiracy. They do not talk about the situation with the victim. Time heals all wounds being the apparent rationale. On the contrary, this promotes fear, guilt, anger and frustration.
- Rule creation and enforcement. They will control the life and movement of the victim in areas unrelated to the attack. This results in feelings of shame, anger and powerlessness, and adds to the existing problem.
- Grief-stricken relatives. They often argue over whose suffering is greatest and ignore the victim's needs.

INVESTIGATORS:

Insensitive and unprofessional conduct by police responders and investigators, often exacerbate the injury and hurt suffered by the victim. Some victims are asked embarrassing questions in an insensitive manner, and often in the presence of others not involved in the investigation. Many victims prefer to remain quiet rather than run the gauntlet of ogling and amused officers. The lack of proper accommodations at most stations, and the shortage of trained trauma staff, must be addressed as a matter of urgency.

MEDICAL PERSONNEL:

Medical personnel, either through overwork or lack of training, are too often rude to and impatient with victims, especially those who have not suffered obvious physical injuries. Emergency rooms not equipped with trained psychologists to handle rape victims.

MALE SUPPORT:

Male support is crucial in combating this scourge. All men have a duty to respect the right of women to control their own bodies.

They must remember that their mothers, sisters and daughters can also become the victims of vicious men.

THE COURTS:

The courts provide some assistance in that the law protects the identity of the victim as much as possible. The victim's identity cannot be published except with the permission of the court. All cases of rape or sexual assault involving children shall be heard in a closed court, unless the court otherwise directs. Judges also have discretion to clear the court when a victim is giving evidence in the case.

NON GOVERNMENTAL ORGANIZATIONS:

Fortunately for women there are existing groups committed to providing treatment, assistance, and expert and confidential counselling to rape victims. The most well known is the RAPE CRISIS CENTRE which has its headquarters at 40 Woodford Street, Port of Spain. Many other organizations that were formed to deal specifically with domestic violence also provide assistance to rape victims, like Families In Action and The Coalition Against Domestic Violence.

Incest

Incest is having a sexual relationship with any blood relative, i.e. parent, child, sister, brother, grandparent, grandchild, uncle, aunt, niece, or nephew. Like rape, this crime is prevalent in Trinidad and Tobago, but is even more underreported, so its true extent may never be

known. Though the data suggests that it occurs more in poor rural districts, the victims can come from all races, classes, and religions. Most of the victims are girls of tender years, who by law cannot consent to sexual intercourse. It is one of the most cruel forms of rape, because it can go on for many years, with most victims only reporting the acts when they are much older.

WHO COMMITS INCEST

Fathers, grandfathers, brothers, and uncles are the usual culprits. Many mothers are aware of these attacks on their daughters, but keep quiet out of physical intimidation by the man, or fear of losing his economic support if he leaves, or is sent to prison.

Some families also adopt the Ostrich mentality and pretend that the problem does not exist. In many cases the child is not believed when she complains about the acts.

EFFECTS OF INCEST AND RELATED SEXUAL ABUSE

Children are generally more fragile than adults, and bad experiences during childhood often tend to shape a person's entire life. The effects of incest tend to mirror those associated with other forms of rape. However, in the case of a child, the closer the relationship with the offender, the more likely that their emotional and psychological development will be affected. This can make the victim incapable of establishing normal sexual relations, or trusting anyone in the future. For the child the sexual act will often be their first sexual encounter, and they are neither physically nor emotionally equipped to deal with the effects. The problems of pregnancy and sexual diseases will be exacerbated when the victim is a child.

HOW THE LAW PROTECTS CHILDREN

The laws of Trinidad and Tobago prohibit sexual intercourse between:

1. An adult person and
 - a) An adopted child, stepchild, foster child, dependent.
 - b) An employee of minor age. A minor is anyone under 18 years of age.
2. A male person and a female who is not his wife, and who is under the age of 14 years.
3. A male person and a female person who are not married and where one party is aged 14-16 years old, whether or not there is consent to the act.

To escape liability the accused party must convince the court:

1. He/She honestly believed the victim to be 16 years old or more.
2. He/She was not more than 3 years older than the victim at the time of the act, and the evidence discloses that the victim actively encouraged the intercourse.

If the intention of these laws is to protect minors from sexual exposure and/or abuse from too early an age, then it appears contradictory to some that an adult can legally do such acts under the sanctity of marriage. 'Conjugal rights can be a vehicle for child sexual abuse. However, this is the state of the law at this time.

PLEASE NOTE THE FOLLOWING:

There is no statutory limitation period for such crimes, so victims are encouraged to report it as soon as they are able to. Perpetrators of incest and sexual abuse of children often start with one child, but when the child reaches an age where she is likely to resist, the offender turns his attention to younger siblings. This pattern of abuse sometimes affects all the girl children in a household.



PREVENTING THE ABUSE

It is more difficult for children to protect themselves from abuse than it is for adults. Most of the abuse takes place in the home, and is committed by a relative that they trust, respect, and sometimes fear.

They are confused by the situation and don't know where to turn.

ADULTS HAVE A RESPONSIBILITY TO PROTECT CHILDREN FROM HARM.

The best form of protection is communicating with the child in a manner which will make her/him feel comfortable in telling you anything. Once this trust and understanding is established, the child should be taught how to handle certain situations.

The following is a recommended way of communicating information about sexual abuse to children:

1. Your body belongs to you. No one should touch you if you don't want them to.
2. "YES" and "NO" feelings — being touched by someone you love is supposed to give you a good feeling. Being hugged and kissed supposed to make you feel happy inside. You get a "YES" feeling inside. But if someone touches you, and you feel confused or uncomfortable, this is "NO" feeling. If someone should touch you in a way you do not like, you have the right to stop it by saying NO. You have the right to say NO to anyone, even adults. It does not matter if that person is your father, grandfather, favourite uncle, schoolteacher or policeman.
3. Do not allow anyone to touch those parts of your body called the private parts". These are the parts of the body that in boys are usually covered by pants or briefs and on girls by vest and panties. If someone wants to touch you there, or wants you to touch him or her there, tell them "NO" in a firm voice.
4. Tell someone you trust — you must tell the person "DON'T DO THAT TO ME". You can run away from them, and avoid being alone with them.
5. The person who touches you may tell you to keep it a secret. He/She may say if you tell anyone:
 - a) You will be taken away from home.
 - b) He/She will be taken away from you, and there will be no one to look after you.
 - c) He/She will spank or punish you.
 - d) God will punish you.

You must not believe them, and you can tell someone you trust what that person did to you.

6. Adults don't ask children to keep secrets. Secrets are for birthday presents and things like that. Secrets are for that special hiding place you and your friends may have. Secrets are not for other things. It's not fair for an adult to ask you to keep another kind of secret. Once an adult who touches you tells you to keep it a secret, you will know that what they did is wrong.

7. Sometimes the person you tell may not believe you. An adult sometimes finds it hard to believe that another adult would do something unpleasant to you. If this happens, tell someone else. Go on telling people e.g. your mother, father, auntie, teacher or neighbour. Do this until someone believes you and say they will help you, and they do so.

PLEASE REMEMBER

1. It's not your fault if someone touches you in a way that confuses you or makes you feel uncomfortable, and gives you that "NO" feeling. Children are not to be blamed for what older



people do to them.

2. If someone interferes with you in a way that makes you uncomfortable, you can tell them to stop.

3. If people pretend to touch you by accident, it's still OK to object and tell them not to do it again.

4. If the person tells you that you are making a fuss about nothing, you should still tell someone you trust.

5. If you feel like it, you could firmly remove someone's hand from your body.

6. Avoid being alone with someone who has touched you in a way you don't like. If this cannot be avoided, then tell them that you will talk or scream if they touch you.

FOR FURTHER INFORMATION PLEASE CONTACT:

RAPE CRISIS SOCIETY

40 Woodford Street, P05. Tel.: 622-7273, Fax: 622-1079

1 2 San Fernando Street, San Fernando. Tel: 657-5355

MAVAW (Men Against Violence Against Women)

Contact Donald Berment, Tel: 637-0924



A Personal Profile:



Evaluating Your Health

Your health is influenced by behaviours in a number of aspects of living. This personal health profile will help you assess these behaviours. For each statement, circle the number of the response that best describes your behaviour, or how you think you will behave when confronted with a particular situation. At the end of each section, add the points received on the statements in that section and record your point total on the appropriate line. At the conclusion of the inventory you will be able to make a broad interpretation of the influence of your behaviours on your personal health status.

► STRESS MANAGEMENT

- | | | | | |
|---|------------------------|--------------------------|--------------------------|-----------------------|
| 1. I seek out change and accept its presence with a sense of confidence and anticipation. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 2. I participate regularly in a physical activity that allows me to expend nervous energy. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 3. I turn to friends for advice and assistance during periods of disruption in my life. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 4. I periodically re-evaluate my experiences with distressful events in anticipation of future events of the same type. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 5. I seek the counsel of professional advisors when stress becomes too difficult to manage. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

- | | | | | |
|---|----------------------------|------------------------------|------------------------------|---------------------------|
| 6. I seek comfort and support from my faith when faced with a difficult period of adjustment. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
|---|----------------------------|------------------------------|------------------------------|---------------------------|

► **PHYSICAL FITNESS**

- | | | | | |
|---|----------------------------|------------------------------|------------------------------|---------------------------|
| 1. I participate in vigorous activity for approximately 30 minutes four times per week. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 2. I am active during the day and prefer a more vigorous approach to work and leisure activity. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 3. I do exercises specifically designed to condition my muscles and joints. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 4. I enter into vigorous activity only after I am warmed up, and I warm down following vigorous activity. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 5. I select properly designed and well-maintained equipment and clothing for each activity. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 6. I listen to my body regarding injury and fatigue, and I seek appropriate care when injured. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |

► **SOCIAL RELATIONSHIPS**

- | | | | | |
|--|----------------------------|------------------------------|------------------------------|---------------------------|
| 1. I feel comfortable and confident when meeting people for the first time. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 2. I establish social relationships with people of both sexes with equal ease and enjoyment. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 3. I participate in a wide variety of groups, including educational, recreational, religious, and occupational groups. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 4. I find the roles of leader and subordinate to be equally acceptable. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |

- | | | | | |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 5. I seek out opportunities to become proficient at a variety of social skills. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 6. I am open and accessible to others in the development of intimate relationships. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

► **NUTRITION**

- | | | | | |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 1. I select a wide variety of foods in an attempt to eat a balanced diet. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 2. I select breads, cereals, fresh fruits, and vegetables in preference to pastries, candies, sodas, and fruits canned in heavy syrup. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 3. I select such foods as peas, beans, and peanut butter as my primary sources of protein while limiting my consumption of red meat and high-fat dairy products. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 4. I select foods prepared with unsaturated vegetable oils while reducing my consumption of red meats, organ meats, dairy products, and foods prepared with lard or butter. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 5. I limit snacking, and I select nutritious foods when I do snack. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 6. I attempt to balance my caloric intake with my activity level. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

► **ALCOHOL, TOBACCO, AND DRUG USE**

- | | | | | |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 1. I abstain from alcohol use, or I use alcohol infrequently and in very limited amounts. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 2. I avoid riding with persons who are consuming alcohol, and I drive defensively, remaining aware that other drivers may be using alcohol. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

3. I avoid the use of tobacco products in all forms, including cigarettes, cigars, pipes, and smokeless tobacco products.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

4. I limit my contact with others who are using tobacco, particularly when in confined spaces or when exposure would be for an extended period.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

5. I take prescription drugs only in the manner prescribed, and I use over-the-counter drugs in accordance with directions.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

6. I refrain from using illegal drugs.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

► SAFETY

1. I attempt to identify the sources of risk or potential danger in each new setting or activity.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

2. I learn procedures and precautions before undertaking new recreational or occupational activities.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

3. I select appropriate equipment for all activities and maintain equipment in good working order.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

4. I curtail my participation in activities when I am not feeling well or am distracted by other demands.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

5. I refrain from using alcohol or drugs when engaged in potentially dangerous recreational or occupational activities.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

6. I repair or report dangerous conditions to individuals responsible for their maintenance.

1	2	3	4
Rarely if Ever	Some of the Time	Most of the Time	Almost Always

► **SELF-CARE**

- | | | | | |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 1. I maintain an accurate, updated personal health history. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 2. I routinely monitor my weight and blood pressure, as well as factors related to specific conditions applicable to my health. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 3. I practice home dental health care, including brushing and flossing. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 4. I maintain my immunization status and receive boosters when scheduled or required by specific conditions. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 5. I take prescription medication through the entire course of the prescribed period of use rather than stopping use when symptoms subside. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 6. I consult a reliable home-medical reference book before beginning care. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

► **ANSWER WHEN APPLICABLE**

- | | | | | |
|--|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 1. I routinely examine my testicles for the presence of small masses or other unusual signs. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 2. I routinely examine my breasts for the presence of masses or other unusual signs. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 3. I routinely receive a Pap smear test. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
| 4. I use my birth control technique in the manner intended to maximize its effectiveness. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |

► **HEREDITARY**

- | | | | | |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|
| 1. I can identify members of my family tree for the previous three generations. | 1
Rarely
if Ever | 2
Some of
the Time | 3
Most of
the Time | 4
Almost
Always |
|---|-------------------------------|---------------------------------|---------------------------------|------------------------------|

2. I can identify the age at death and the cause of death for all family members to whom I am genetically related for the previous three generations.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

3. I receive medical consultation for conditions for which I may have a genetic predisposition (diabetes, hypertension, etc.)

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

4. I limit my exposure to radiation and to toxic environmental pollutants.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

5. I will openly share information concerning inheritance abnormalities with potential mates.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

6. I will seek genetic counselling for known inherited conditions before having children.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

► SLEEP, REST, AND RELAXATION

1. I plan my daily schedule to allow time for leisure activity.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

2. I plan my daily schedule to allow time for contemplation, meditation, or prayer.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

3. I receive between 7 and 8 hours of sleep daily.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

4. I refrain from using sleep-inducing over-the-counter drugs.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

5. I curtail activities when I need to recover from illnesses and injuries.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

6. I attempt to leave the demands of work, school, or parenting outside of my leisure or relaxation time of day.

1	2	3	4
Rarely If Ever	Some of the Time	Most of the Time	Almost Always

► HEALTH CONSUMERISM

- | | | | | |
|--|---------------------|-----------------------|-----------------------|--------------------|
| 1. I am skeptical of practitioners and clinics who advertise or offer services at rates substantially lower than those charged by reputable providers. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 2. I have the financial resources necessary to cover the costs associated with a major illness or hospitalization. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 3. I am skeptical of claims that "guarantee" the effectiveness of a particular health care service or product. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 4. I accept information that is deemed valid by the established scientific community. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 5. I pursue my rights in matters of misrepresentation or consumer dissatisfaction. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |
| 6. I seek additional opinions regarding diagnoses indicating a need for surgery or other costly therapies. | 1
Rarely if Ever | 2
Some of the Time | 3
Most of the Time | 4
Almost Always |

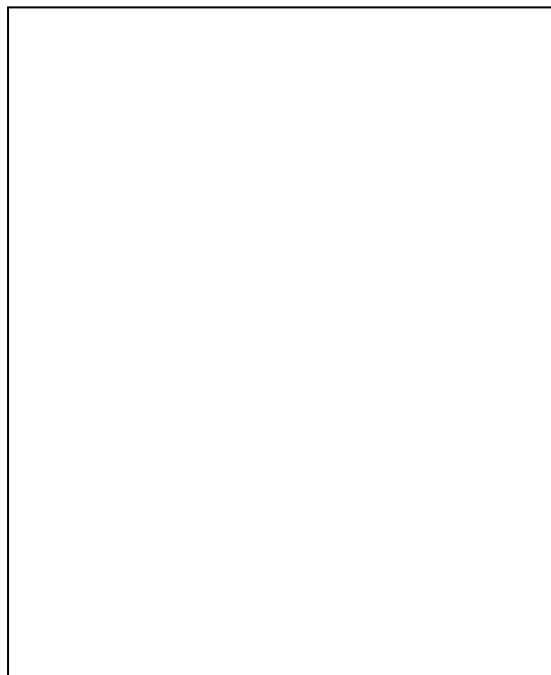
► INTERPRETATION

- 196-240 Behaviours are very supportive of high-level health.
 151-195 Behaviours are relatively supportive of high-level health.
 106-150 Behaviours are relatively destructive to high-level health.
 60-105 Behaviours are very destructive to high-level health.

► TO CARRY THIS FURTHER . . .

Were you surprised at your score? Remember that this assessment provides a brief look at your health behaviours. It should help identify areas you may want to pay careful attention to as you read this book. The authors hope this assessment will serve as a positive motivator for you, regardless of your score. Remember that YOU can change your health behaviours. Good luck!

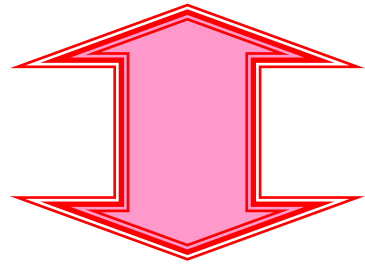
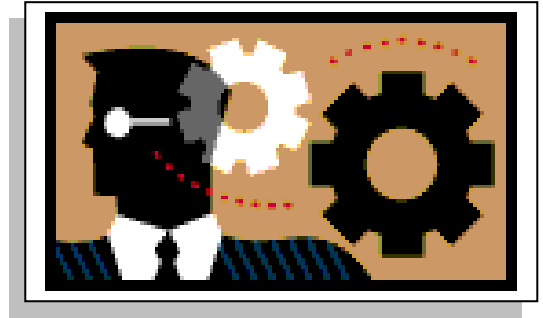
PART THREE



MAN

TALK

PART THREE



MAN
TALK

CONTENTS

INSIDE THE MALE MIND 2007.

A JOINT PROJECT BY MAVAW AND THE CNMG GROUP 91.1FM TALK CITY.

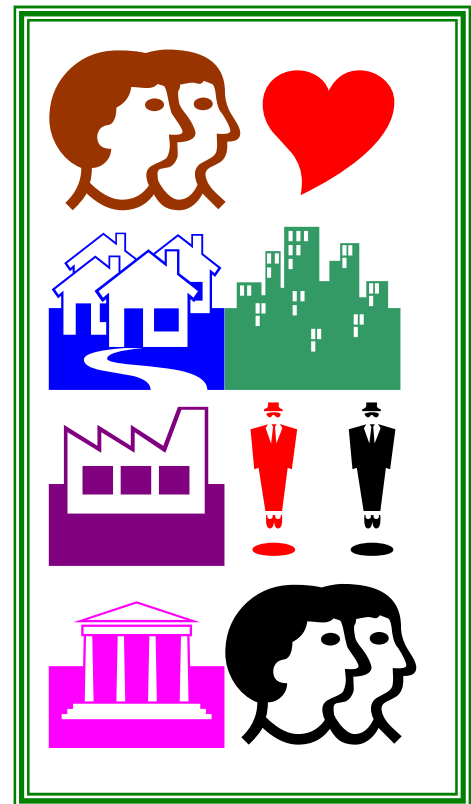
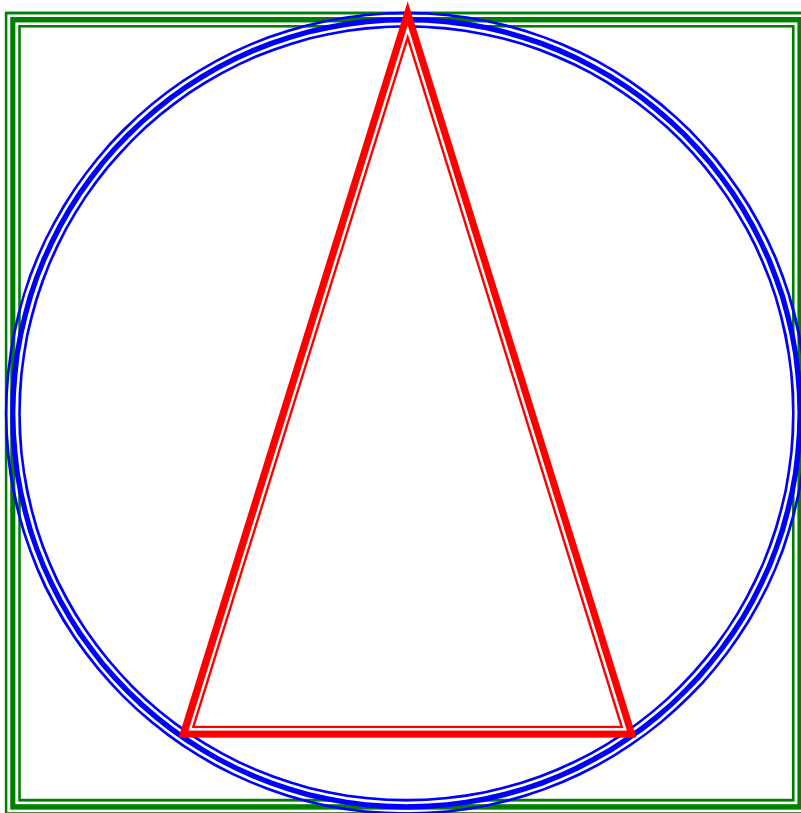
BY MEN AGAINST VIOLENCE AGAINST WOMEN.



Twenty-First Century

2007 Joint Project By M.A.V.A.W. and
CNMG 91.1FM Talk City.

A Culture Of Peace



Directors: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.
Company No M 1799(95) Charitable Status No F (BUD):7/4/205
Yours In Nation Building.



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. Fax: 637-0924. Cell: 383-6184

Email: mavawsec@yahoo.com. Web Site: <http://www.mavaw.com>.



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Fri/28/Dec/07

Our Ref: mavaw/IMM-rep

Your Ref:

**Mr. Julian Rogers,
Chief Content Officer,
CNMG Group,
Maraval Road,
PORT OF SPAIN.**

REPORT ON STRATEGY MEETING HELD ON
THUR/28/DEC/07 AT CNMG STUDIO BEFORE
8PM. ALSO A FEW SUGGESTIONS THAT WERE MADE
FOR INSIDE THE MALE MIND 2008.

**ATTENTION: Mrs. Gail Seegobin, Mr. Raymond Edwards, Ms. Jessie May Ventour,
Mr. Justin Dookie, Mrs. Vanessa Herbert Fortune, Dr. Jerome Teelucksingh, David
Law, Brian Bradshaw, Michael Augustus and Dr. Robert Moultrie.**

Ladies and Gentlemen:

Thursday the 27th day of December, was the final airing of the “Inside the Male Mind Programme 2007” and during the strategy meeting before 8pm, we discussed 5 items and made a few suggestions.

Present in the Studio Meeting were, Donald Berment, Michael Augustus, Brian Bradshaw, Justin Dookie and Vanessa Herbert Fortune. Contributions were made prior to the meeting by Raymond Edwards, Dr. Robert Moultrie, Dr. Jerome Teelucksingh and David Law. Jesse May Ventour contributed to the process, during the 8-10pm review session, via the phone from her holiday location and so did Dr. Jerome Teelucksingh.

The suggestions were as follows: -

1. The Programme for 2008 should have a man and a woman co-hosting the discussion, wherever the topics suggest a need for a gender balance from the interviewers and hosted by a man or two men where the topics suggest the need for a “men’s only panel”.
2. The 2008 Programme could be more interesting if it had the following items included: -
 - (a) A few “voxpath’s (talk views from the street).
 - (b) A 5 minute feature opinion from an expert in the topic under discussion, with this opinion also being discussed.

- (c) A musical input related to the topic, either from the station's archive or by hiring an "extempore" artist like Black Sage to produce it.
 - (d) A short recorded dramatic skit, to be used as a teaching aid focused on creating solutions, alongside gender sensitive poetry.
3. There should be Radio, TV and Newspaper "Promo's", for each Programme, in a quantity and quality as funding/sponsorship allows.
 4. To realize the suggestions at 1,2 and 3 above, Men Against Violence Against Women (MAVAW), is suggesting that the CNMG Group employ two (2) of our members, who will be involved in planning the Programmes, co-hosting them where necessary, acquiring "voxpops", feature opinions and preparing "dramatic skits" and gender sensitive poetry for recording and replaying during the 2-hour Programmes.
 5. The two (2) persons MAVAW is offering CNMG, David Law and Brian Bradshaw, have a long history of being involved in gender studies and related practical men's studies, both with passionate, self learning methodologies. They have attended numerous short courses and training programmes in the same areas and have appeared on TV, Radio and in the press medium over the years.

Consequently, we recommend most highly, that David and Brian be part of the production team for "Inside the Male Mind 2008". Brian Bradshaw's CV is appended to this Report and David Law will produce his own in a few days. An interview with David and Brian can be arranged at your earliest convenience. David's cell phone number is 396-4285 and email address is davidlaw_84@hotmail.com. Brian's cell phone number is 483-1226 and email address is generalrockjaw46@yahoo.com.

Mr. Rogers, until a decision is made by the CNMG Group, we suggest that Justin Dookie and Vanessa Herbert Fortune continue the Programme as per our "suggestion 1" above and with topics from the List provided below.

At this point, in order to place the Programme Title accurately within its concept of providing positive male voices, thoughts and feelings for research, training and self development, today and in the future, I am suggesting that the Programme Title for 2008 be "Inside the Male Mind—Talk Radio Today—Focused on the Future".

With this Title change, in addition to its relevance, there will be no question of infringing any intellectual property, as the contribution of "Inside the Male Mind" by Jesse May Ventour and "Talk Radio Today—Focused on the Future", by me, Donald Berment are given freely to the Nation Building process, as our original ideas, echoing our sentiments, from the domain of applied spirituality.

As recorded elsewhere, the guiding principle for the Programme in 2007, as understood by me, came from this statement, quote *“The philosophical underpinning of this outreach effort, by a Men’s Organisation, Concerned Men and Women of our beloved Nation and a Corporate body, is couched in a belief system, which acknowledges the innate goodness of the human being and seeks to withdraw, embrace and share the benefits of such goodness in a manner and location, where it will produce the most successful outcomes”* unquote.

Therefore, all the topics for this year 2007 resonated in varying degrees and intensity, *gender and development, local culture, psycho social behaviour, men’s studies and professional practices.*

The production Team for 2008 will formulate its philosophical base, structure, topic schedule etc. and can invite other men and women to contribute.

My work in 2008 has been mandated by the valuable 43-2hour contributions made in 2007. I have no choice but to focus my contribution in 2008, towards making maximum use of these 43 powerful, educational, illuminating discussions, already collected in MP3 format.

Inter alia this means: -

1. Getting a new or finding a friendly website to make these Programmes accessible to the world and provide another forum for “Male Talk”
2. Getting all 43 Programmes transcribed in Book Form for sharing with our Libraries, tertiary learning institutions, NGO’s, CBO’s, RBO’s and all Primary and Secondary Schools.
3. Getting an adequate supply of DVD’s and CD’s of this year’s Programmes for distribution to training programmes and counseling sessions, when asked to so do.
4. Supplying all Guests with literature gifts of published work by other guests.

In addition, I will also continue the discussion for a Programme titled “*Inside the Female Mind—Woman Talk—What they say, What they mean*”

The list of suggested topics for next year 2008, until the new production team is established is: -

- From Raymond Edwards and Donald Berment—Calypso, Pan, Mas, Parenting, the Constitution.
- From David law—Boyhood Struggles, Relationship Building, Parenting and Re-parenting.
- From Jesse May Ventour—what it takes to be a man, Men and Family, parenting, Men and Community, Men and the Constitution.

- ***From Dr. Jerome Teelucksingh***—Men who are Calypsonians, Men who are Chutney Singers, Men who are Deportees, Men who are illegal Immigrants, Men who are infertile, Men who cheat on wives/girlfriends, Men who remain in relationships where wives/girlfriends cheat, Men who are schoolteachers, Men who are volunteers e.g. FEEL, blood donors, Men who are ethnic minorities—whites, Chinese, Syrians, Men in interracial unions, Men who are weightlifters, Men who are in Sports with women—aerobics, Men who are Construction workers, Men who are beaten by wives/girlfriends, Men who are self-employed, Men who are Sexist, Men involved in arts, drama, dance, Men who earn minimum wages, Unemployed married men, Men and Terrorism, Men who are Feminists, Men and Racism, Men who are Prostitutes, Men with HIV and AIDS, Men on Death Row, Men who hate other men, Men who are atheists, Men who are mentally challenged, Men in women's jobs, hairdressing, secretaries, Men who are comedians, Men and Scandals, Men who are homosexuals, Men who have been raped, Men and Party Politics, Men and the Glass Ceiling, Men and Masculinity, Men and steel band Violence.

Again on behalf of MAVAW and all the guests who have contributed freely and willingly in providing this valuable resource to our Nation Building Process, I formally thank the CNMG Group most profoundly for the opportunity and their participation, especially the 91.1FM crew, namely:- Mrs. Gail Seegobin, Mr. Raymond Edwards, Ms. Jesse May Ventour, Ms. Esther Saveedra, Mrs. Vanessa Herbert Fortune, Mr. Justin Dookie and Technician Keston.

Special thanks goes to you Mr. Rogers as the Chief Content Officer of the CNMG Group for having the vision to see the tremendous value Radio can provide to healing our Nation.

I wish you and yours all the best for the New Year and beyond.

Signed Donald Berment, Secretary.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators : David Law, Johnny Bharath,

P.O.R.O.

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

2007 COMPLETED SCHEDULE OF TOPICS FOR DISCUSSION ROUNDTABLE

“2007 Inside the Male Mind: Women Can’t Hear What Men Don’t Say.”

The Primary Objective of this Programme is to provide an immediate and long term enhancement to the Nation Building process. This is achieved by presenting, collecting, recording and disseminating the positive voices, thoughts, opinions and feelings of our males in society during two hour interviews every Thursday from 8pm to 10pm. The material will then be used for research, training, counseling and self development. Sharing this “male space” with women, in a respectful and intelligent manner confirms that healthy relationships can be achieved once there is mutual respect and appreciation. The philosophical underpinning of this outreach effort by a Men’s Organisation, Concerned Men and Women of our beloved Nation and a Corporate body, is couched in a belief system, which acknowledges the innate goodness of the human being and seeks to withdraw, embrace and share the benefits of such goodness in a manner and location, where it will produce the most successful outcomes. Knowledge is Power—Sharing it is Love.

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
04 January	What it takes / means to be a man in today’s society / world <u>(COMPLETED)(1th)</u>	- Men are pulled in different directions; not sure how to be men - Socialization is the greatest harm being done to men - Societal pressure on men to be a certain way is detrimental to men’s holistic health	- Donald Berment - Michael Augustus - Dr. J. Teelucksingh - Brian Bradshaw - Wendell De Leon - Victor Karibiri - David Law
11 January	Men as fathers in the family <u>(COMPLETED)(2nd)</u>	- The importance of being a positive male role model for both sons and daughters, nieces and nephews - The various types of abusive men.	- Dr. Russell Foote - Wendell De Leon - Michael Augustus - Donald Berment
18 January	Men and their communities <u>(COMPLETED)(3rd)</u>	- The importance of appreciating, respecting and keeping in touch with your community - The importance of being a positive male role model	- David Mohammed - Christine Hosein - Donald Berment - David of “Congress of the People”
25 January	Men and the media—Not Done. <u>(A RERUN OF Men As Fathers In the Family was Done)</u>	- The importance of being a positive male role model for both sons and daughters, nieces and nephews - The various types of abusive me	- Dr. Russell Foote - Wendell De Leon - Michael Augustus - Donald Berment.

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
01 February	What men really want in relationships PART ONE <u>(COMPLETED)(4th)</u>	- Do men really and want intimacy? - Why do so many men simply settle for slam-bam-thank you ma’am? - Are men “gun shy” when it comes to commitment or do women drive men away by defining the relationship?	- Dr. Russell Foote - Wendell De Leon - Michael Augustus - Brian Bradshaw
08 February	What men really want in relationships PART TWO <u>(COMPLETED)(5th)</u>	<u>Great Interest in the airing of this Topic last week suggested that another session should be aired to allow for participation.</u>	- Dr. Russell Foote - Wendell De Leon - Michael Augustus - Brian Bradshaw
15 February	Men and Carnival <u>(COMPLETED)(6th)</u>	- Men as artistes and bandleaders - The male calypsonian - The pan man and Men in Calypso e.g. Machel Montano, Bunji Garlin, etc.	- Dr. Russell Foote - Alexander (D Great) - Lowenthal - Donald Berment
22 February	Men and Sex PART ONE <u>(COMPLETED)(7th)</u>	- The dangers lurking today i.e. disease - The problems and dysfunctions with the coming of age, diabetes, cancer, etc.	- Dr. Giriraj Ramnanan - Brian Bradshaw
01 March	Men and Sex PART TWO—Not Done. <u>(A RERUN OF Men and Sex PART ONE)</u>	~~Because of the importance of this topic to Nation Building and the developing of well balanced citizens Part Two will consolidate the main issues.~~	- Dr. Giriraj Ramnanan - Brian Bradshaw
08 March	Men’s health : PART ONE <u>(COMPLETED)(8th)</u>	- Why men should be more concerned about living healthier lifestyles - Positive Thinking and Health - Herbal medicine, Nutrition and Health.	- Dr. Joel Teelucksingh - Dr. Robert Moultrie
15 March	Men and Spirituality <u>(COMPLETED)(9th)</u>	- The difference between religion and spirituality - Men as spiritual beings i.e. how religion defines what a man should be - Men feeling left out / isolated / disconnected from the church.	- Clive Nunez - Dwayne Henderson - Donald Berment - Dr. Robert Moultrie
22 March	NO PROGRAMME TO RUN	SPACE WAS PAID FOR BY SPONSOR FROM THE UNIVERSITY	GUESTS TO BE RESCHEDULED

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
29 March	Men and Feminism <u>(COMPLETED)(10th)</u>	▪ Men as pro-feminists ▪ Is there a feminist backlash? ▪ Are men being marginalized? ▪ What is Gender Mainstreaming. ▪ Is our Draft Gender Policy neutral?	• Gregory Sloane Seale ▪ Dr. Robert Moultrie ▪ Donald Berment
5 th April	Men and Party Politics <u>(COMPLETED)(11th)</u>	▪ Are we getting the best party politics? ▪ What is good about party politics? ▪ What is bad about party politics? ▪ Will women be better at party politics?	▪ Rocky Garcia COP ▪ William Latchman ▪ Dr. Anderson Morris ▪ Donald Berment
12 th April	Is the education system failing our men? <u>(COMPLETED)(12th)</u>	▪ Girls continue to outperform boys --why? ▪ What changes must be made to the education system to ensure that boys can once again do well? ▪ Is it Male Backlash or Marginalisation	▪ Dr. Jerome Teelucksingh ▪ Dr. Lenox Bernard ▪ Prof. Judy Sheppard
19 th April	Men and Religion <u>(COMPLETED)(13th)</u>	▪ Is Religion necessary? ▪ What are the positives in its practice? ▪ What are the negatives in its practice? ▪ Why is the male population absent? ▪ What is the future of Religion?	▪ David Mohammed ▪ Dr. Kenneth Niles ▪ John Johnson Ex. Lay Minister
26 th April	Men as Single Parents. <u>(COMPLETED)(14th)</u>	▪ Definition of a male single parent ▪ Can a single father nurture boys and girls the most effective way? ▪ Is the Government doing enough to help single parents? ▪ What community initiatives are needed?	▪ MichaelAugustus (Project Anthropos) ▪ Wendel De Leon (NIPRF) Fathers Association) ▪ Donald Berment
3 rd May	Men and Sport <u>(COMPLETED)(15th)</u>	▪ Why is sport so important to men? ▪ Sport as a means of male bonding and a teacher of discipline and skill ▪ Sport for upward mobility for disadvantaged youth. ▪ The contribution of sport towards building communities	• Michael Thomas (Martial Artist) • Vidia Ramphal • Brian Bradshaw ▪ Dr Russell Foote ▪ Dr. Roy Mac Cree ▪ Dr. Iva Gloudon

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
10 th May	Men and Mental Health (PART 1) (Depression/Stress/Trauma) <u>(COMPLETED)(16th)</u>	▪ What is Mental Health? ▪ A survey of Mental Health statistics e.g. men vs. women. ▪ What types of mental health issues are prevalent in T&T etc.?	▪ Wendell de Leon (Family Therapist) • Dr. Russell Foote (Sociologist) • Nicholas Chadee
17 th May	Men and Mental Health (Part 2) (Addiction/Pornography) <u>(COMPLETED)(17th)</u>	▪ Main kinds of addiction impacting on mental health of T&T men e.g. drugs, alcohol, smoking, eating, pornography, kinky sex, etc. ▪ How big a problem is pornography? Is there a link to increase in gang rapes, sodomy, pedophilia, etc.	▪ Dr. Giriraj Ramnanan, Sexologist ▪ Mr. Errol Blackman , Manager M.H. S. St Ann’s hospital. ▪ Mr. Patrick Isaac
24 th May	Men and the Law <u>(COMPLETED)(18th)</u>	▪ How does the law discriminate against men vs. women? ▪ Men seem to be victims of the criminal justice system more than women.	▪ ACP Winston Cooper ▪ Donald Berment ▪ Cedric Neptune, Pres. Social Welfare
31 st May	Men and Love <u>(COMPLETED)(19th)</u>	• What does love really mean to men? • Are men really the great lovers they think they are? How can they be better?	▪ Wendell de Leon ▪ Brian Bradshaw ▪ Dr. Kenneth Niles ▪ Father Auguste ▪ Michael Augustus
7 th June	Men and the Environment <u>(COMPLETED)(20th)</u>	▪ What are the environmental issues? ▪ Do T & T laws protect our breaches? ▪ Is T & T part of existing International Conventions?	▪ Prof. B. Agozino ▪ Dr. W. Kublasingh ▪ Michael King, CUEC ▪ John Blair USA
14 th June	Men as Prisoners and Crime Victims <u>(COMPLETED)(21st)</u>	▪ How many men are in prison? ▪ Is our system equipped for change? ▪ What else is needed in the system? ▪	▪ Dr. R. Moultrie. ▪ Wayne Chance ▪ Clive Nunez ▪ William Lutchman
21 st June	Men still Hurting from Abuse <u>(COMPLETED)(22nd)</u>	▪ What are the types of abuse to men? ▪ Are there enough support systems for men hurting from abuse? ▪ How is this abuse observed?	▪ Dr. Kenneth Niles ▪ Brian Bradshaw ▪ Dr. R. Moultrie ▪ Donald Berment

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
28 th June	Men and Marriage i.e. Men who Marry, Men who never Marry Divorced Men, Monogamy and Polygamy <u>(COMPLETED)(23rd)</u>	▪ Why do men marry? ▪ Why do men not marry? ▪ What are the benefits to marriage? ▪ Is polygamy a preferred union? ▪ Are divorced men hurting?	▪ Adam Deane ▪ Samuel Alexander ▪ Marlon Cockin ▪ Brian Bradshaw ▪ Dr. Kenneth Niles ▪ Dr. R. Moultrie ▪ Deo from Canada
5 th July	Men and Different Lifestyle— Homophobia, Heterosexuality, Gay, Bi-sexual and Transgender Males <u>(COMPLETED)(24th)</u>	▪ What is Homophobia? ▪ Is the attitude to different lifestyle choices changing? ▪ What has to be done to achieve peaceful societal growth?	▪ Luke Sinnette ▪ Dr. R. Moultrie ▪ Dr. Raj. Ramanan ▪ Donald Berment ▪
12 th July	Men working with Executive Women <u>(COMPLETED)(25th)</u>	▪ Do women make good bosses? ▪ What are the negatives? ▪ What are the positives?	▪ Stephen Thomas ▪ Clifton Simpson ▪ Donald Berment ▪ Jori Daniel
19 th July	Men and the Media <u>(COMPLETED)(26th)</u>	▪ Is the Media doing its job properly? ▪ What is wrong with present Media? ▪ What is the future of local Media? ▪	▪ R. Ramcharitar ▪ Andy Johnson ▪ Vernon Kalewan ▪ Wesley Gibbings ▪ Shilini Maharaj
26 th July	Men and the Military <u>(COMPLETED)(27th)</u>	▪ Is the Military good for men? ▪ Are men prepared to live in society after the training? ▪ How do you train men?	▪ Corporal R. Lynch ▪ Warrant M. Stewart ▪ Corporal V. Dick ▪ CMS Garth Edmond
2 nd August	Men and the Police Service <u>(COMPLETED)(28th)</u>	▪ What is happening with our police? ▪ Are the structures working well? ▪ What else is needed? ▪ Is the public support enough?	▪ DPC Winston Cooper ▪ RPI Ian Miller ▪
9 th August	Men and Trade Unions <u>(COMPLETED)(29th)</u>	▪ What are the benefits of Unions? ▪ Is the system working properly? ▪ How can we improve it?	▪ Jennifer Baptiste ▪ Robert Guiseppi ▪ David Abdulah ▪ Rudrinath Indarsingh

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
16 th August	Men and Physical Challenges <u>(COMPLETED)(30th)</u>	- Is enough being done for this group? - If not why not? - What are the main concerns? - What are your needs from Budget Day	- George Daniel - Michael Ashby - Michael Fraser - Shervon Campell
23 rd August	Men and the Fire Service <u>(COMPLETED)(31st)</u>	- What is happening with our Firemen? - Are the structures working well? - What else is needed? - Is the public support enough? - Describe the training process.	- FSO Celunis Wallen - FSUBO Joan Hospedales - FF Denise Jayms - DFO Mervyn Layne
30 th August	Men and Independence <u>(COMPLETED)(32nd)</u>	- What does Independence mean? - Are we achieving Independence? - Was Colonialism a better System?	- Dr. Russell Foote - William Lutchman - Donald Berment
6 th September	Men as Teachers in the System <u>(COMPLETED)(33rd)</u>	- Do we have enough male teachers? - Is the absence of male role models in schools bad for national development? - Are women teachers coping well?	- Dr Lennox Bernard - Clyde Permell
13 th September	Young Men and Religious Life. <u>(COMPLETED)(34th)</u>	- Are young men interested enough? - What has to be done to get interest? - What about marriage for young men? - What are the statistics for young men entering religious life?	- PT Gyandeo Persad - Fr. Dwight Merrick - Mirza Ali-Mohammed
20 th September	Men and Divorce. <u>(COMPLETED)(35th)</u>	- Are married men happy? - What are the divorce statistics? - What problems do men face during divorce?	- Husbands Club - Samuel Alexander - Dr. R Moultrie - Michael King
27 th September	OPEN MIKE NIGHT <u>(COMPLETED)(36th)</u>	Relationships and the issues	01.1 Talk City Staff - Raymond Edwards - Stacy 7 Yemen - Andrew Chan
4 th October	NO PROGRAMMES DUE TO	25 th October	NO PROGRAMMES
11 th October	2007 ELECTION MATTERS	1 st November	ELECTION MATTERS
18 th October	THIS THREE WEEKS	8 th November	THIS THREE WEEKS

2007 Completed Schedule Of Topics For INSIDE THE MALE MIND “women can’t hear what men don’t say”

DATE	TOPIC	DISCUSSION POINTS	INVITED GUESTS
15 th November	Men in Leadership Roles—Part 1 <u>(COMPLETED)(37th)</u>	▪ What are Leadership Roles? ▪ When is a Leader Identified? ▪ What are Leadership Qualities?	▪ Commodore Anthony Franklyn. ▪ Donald Berment
22 nd November	Men in Leadership Roles—Part 2 <u>(COMPLETED)(38th)</u>	▪ THE TOPIC OF LEADERSHIP IS NECESSARY AT THIS TIME , TO BE DISCUSSED AT LENGTH AND WITH MEN AND WOMEN,	▪ Dr. Anderson Morris ▪ Richard Dick
29 th November	Men in Leadership Roles—Part 3 <u>(COMPLETED)(39th)</u>	▪ THE TOPIC OF LEADERSHIP IS NECESSARY AT THIS TIME , TO BE DISCUSSED AT LENGTH AND WITH MEN AND WOMEN,	▪ Anthony Watkins ▪ Dr. Robert Moultrie ▪ Dr. Kerry Sumesar ▪
6 th December	A Man and his Money <u>(COMPLETED)(40th)</u>	▪ How does a man view money? ▪ What is the best way to use money? ▪ Does money affect men’s behaviour? ▪ Do women manage money better?	▪ Peter Osbourne ▪ Cecil Slyvester ▪ Dr. Faud Khan
13 th December	A Life with Books—A Man’s View. <u>(COMPLETED)(41st)</u>	▪ Are books important to men? ▪ Can books assist in men’s growth? ▪ What are the benefits books provide? ▪ Are our Libraries doing enough?	▪ Van S. Stewart ▪ Kim Boodram ▪ Conrad Parris ▪ Paul Keen Douglas ▪ Donald Berment
20 th December	Men and Parang. <u>(COMPLETED)(42nd)</u>	• How important is Parang to men? • Does Parang cause family problems? • Is Soca Parang genuine Parang? • Are there women doing Soca Parang? • Is Calypso better for you than Parang?	• Kenny Joseph • Black Sage • Calypsonian Crazy • Michael Lezama NPATT • Ronnie Oliverie
27 th December	Inside the Male Mind in Retrospect. Public Review of the year 2007. The original Team will participate. <u>(COMPLETED)(43rd)</u>	▪ Did you like the Programme? ▪ What were your favorite Topics? ▪ What will you like to hear next year? ▪ Will you contribute next year? ▪ What improvements will you suggest?	▪ Jessie May Ventour ▪ Dr. Robert Moultrie ▪ Brian Bradshaw ▪ Dr. Jerome Teelucksingh ▪ Donald Berment ▪ Michael Augustus

43 Live Programmes Aired—6 Thursdays were used for Election Data—2 Programmes were Rerun.

1 Thursday slot was paid for by the University—giving a Total of 52 Weeks in 2007.



THE UNIVERSITY OF THE WEST INDIES

ST. AUGUSTINE, TRINIDAD AND TOBAGO, WEST INDIES

THE MAIN LIBRARY

Telephone: (868) 645-3232 Ext. 2132 Fax: (868) 662-9238 e-mail: mainlib@library.uwi.tt

Ref.: G140/WI

7 May 2007

Mr Donald Berment
Secretary
Men Against Violence Against Women
45 River Estate Circular
River Estate
DIEGO MARTIN

Dear Mr Berment,

We wish to acknowledge with thanks receipt of the under-mentioned publications which you donated to the Library:-

- **Inside the Male Mind: Women Can't Hear What Men Don't Say [1st CD] (2007) s.l.: Trinidad and Tobago: Men Against Violence Against Women. (1 CD)**
- **Inside the Male Mind: Women Can't Hear What Men Don't Say [2nd CD] (2007) s.l.: Trinidad and Tobago: Men Against Violence Against Women. (1 CD)**
- **November 25th is the International Day for the Elimination of Violence Against Women—a UN Day. (2006) s.l.: Trinidad and Tobago: Men Against Violence Against Women. (1 CD)**

The Library is grateful for your gifts which are a welcome addition to our West Indiana Collection. The additional copies of the compact discs will be sent to the Campus Libraries in Barbados and Jamaica as you requested.

Your co-operation in developing the Library's collection is very much appreciated.

Yours sincerely,

L. Greenwasan

for Stella Sandy (Ms.)
Librarian II
Head, Serials and Acquisitions



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Telephone: (868) 645-3232 Ext. 2132 Fax: (868) 662-9238 e-mail: mainlib@library.uwi.tt

Ref.: G140/WI

14 June 2007

Mr Donald Berment
Secretary
Men Against Violence Against Women
45 River Estate Circular
River Estate
DIEGO MARTIN

Dear Mr Berment,

We wish to acknowledge with thanks receipt of the under-mentioned compact disc which you donated to the Library:-

- **Inside the Male Mind: Women Can't Hear What Men Don't Say [3rd CD] (2007) s.l.: Trinidad and Tobago: Men Against Violence Against Women. (1 CD)**

The Library is grateful for your gift which is a welcome addition to our West Indiana Collection. The additional copies of the compact disc will be sent to the Campus Libraries in Barbados and Jamaica as you requested.

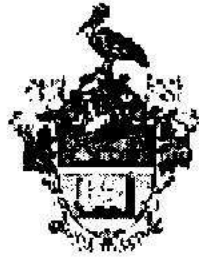
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S. Sreenivasan

for Stella Sandy (Ms.)
Librarian II
Head, Serials and Acquisitions

TSA 61
2006/05/25
/sss



THE UNIVERSITY OF THE WEST INDIES

ST. AUGUSTINE, TRINIDAD AND TOBAGO, WEST INDIES

FACULTY OF SOCIAL SCIENCES

DEPARTMENT OF BEHAVIOURAL SCIENCES

Telephone: (868) 662-2002, 645-3232-9 Exts. 2020, 2024, 2539, 3234, Fax: (868) 663-4948

July 11, 2007

Mr. Donald Berment
Secretary
Men Against Violence Against Women
45 River Estate Circular
River Estate
Diego Martin

Dear Mr. Berment,

Thank you for the three CDs on "Inside the Male Mind", which I received today on behalf of the Social Work Unit, Department of Behavioural Sciences.

They will be used in our workshops and training sessions to continue our sensitisation of our students and practitioners to the issue of violence in our society.

Yours sincerely,

Jacqueline A. Cameron-Padmore (Mrs.)
Practicum Coordinator
Social Work Unit



Centres: 40 Woodford Street, Newtown, Port of Spain, Trinidad, W.I. • Telephone: (868) 622-7273 Fax: (868) 622-1079
12 San Fernando Street, San Fernando, Trinidad, W.I. • Telephone: (868) 657-5355
Website: www.rapecrisis.netfirms.com • E-mail: rapetnt@tstt.net.tt

September 27, 2007

Mr. Donald Berment
Secretary
Men Against Violence Against Women
45 River Estate Circular
River Estate
Diego Martin

Dear Mr. Berment,

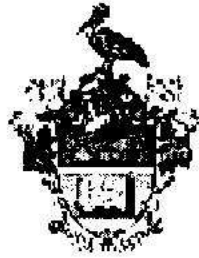
We wish to thank you for the compact disc which you donated to the Rape Crisis Society
Inside the Male Mind: Women Can't Hear What Men Don't Say.

You can be assured that the information will be very useful in the different workshops of the Society.

Thank you and continued success in your work.

Sincerely,

Marcella Alcalá
President



THE UNIVERSITY OF THE WEST INDIES

ST. AUGUSTINE, TRINIDAD AND TOBAGO, WEST INDIES

FACULTY OF SOCIAL SCIENCES

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Jacqueline A. Cameron-Padmore (Mrs.)
Practicum Coordinator
Social Work Unit



Men Against Violence Against Women

45 River Estate Circular, River Estate, Diego Martin, Trinidad.

Hot Lines: 637-0924, 668-5133. Fax: 637-0924. Cell: 383-6184

Email: mavawsec@yahoo.com. Web Site: <http://www.mavaw.com>.



DIRECTORS: Christopher Holder, CHAIRMAN. Donald Berment, SECRETARY. Desmond Persad, TREASURER.

Date: Friday 23rd March 2007

Our ref: mavaw-IMM/RB-1

Your Ref:

Mrs. Tisha Lee,
Group Corporate Manager,
Republic Bank Limited,
9-17 Park Street,
PORT OF SPAIN.

SUBJECT: Radio Programme on 91.1FM
titled "INSIDE THE MALE MIND—
women can't hear what men do'h say"

Dear Mrs. Lee,

Together with Radio 91.1 FM, the organisation **MAVAW (Men Against Violence Against Women)** and other persons, have to date completed 9 (nine) two hour talk programmes, in the domain of applied spirituality, which are suitable for research, training, self and non-self development and an immediate enhancement to national development processes.

This Programme is Titled **"Inside The Male Mind--women can't hear what men do'h say"** and is hosted every Thursday at 8pm to 10pm, by Radio Journalist Jessie May Ventour of 91.1FM and one critical targeted group for the use of these programmes, edited and controlled by their teachers, is the thousands of young males and females who are passing through our school system, minus an input from the positive males in our society, even if it is a recorded voice outreach.

When you visit schools and/or listen to the teachers facing this situation on a daily basis and see their genuine concern in their cries for help, you have no choice but to keep on contributing to this applied spirituality outreach effort.

Thursday the 15th day of March 2007, the first school to get a copy of the IMM CD, holding the first six sessions (see attached Schedule), is the San Juan Government Primary Boy School, situated on the same compound with the San Juan Government Primary Girl School. Over 150 boys have 16 female and 4 male teachers and over 150 girls have 20 female and no male teachers and after providing a 2 hour presentation to the Standard 4 students, under the request and guidance of Mr. Vindra Persad, their Form teacher, I personally saw the immense need and thirst for positive male role modelling.

MAVAW is now seeking sponsors for this programme and the Radio cost for 1 month, with an offer of 50 -30 second advertisements and opening and closing credits on the Thursday the programme is aired is \$TT 5,000.00 (see attached invoice minus the VAT). Cheques are made payable to the CNMG Group. Two sponsors can share 1 month and the Station will use their announcers to make the commercials, if required. Sponsors can also choose their topics and select the dates for airing.

The cost to provide complimentary books to our Guests and selected Callers will be the selling price of these books in the bookshops. The CD's and DVD's necessary to put the talk and video presentations for Guests, Callers and Schools etc., will also have to be considered (no charge for copying them) and could be another \$TT 5,000.00 (the relevant invoices to be sent)

The Bumper Stickers, printer ink and incidental stationery (envelopes, paper etc.) is another cost which is going to be factored in and invoices from the respective stores will be provided to sponsors and could be another \$TT 2,000.00. No money will be given to MAVAW unless absolutely necessary and our methodology for project implementation, as is our methodology for office operations being community base homes of our members, is a pioneering model and simplifies our recording, accounting functions. Transcribing the MP3 Files into text form will cost \$1,200.00TT per 6 Programmes, 1 CD (200.00\$TT per session).

Professional services from 8pm to 10pm on Thursdays at Radio 91.1F is a contribution to National Development from our committed, concerned citizens and members of **Men Against Violence Against Women (MAVAW)** of Trinidad and Tobago. We know that this effort is very welcome because the feedback is extremely encouraging and look forward to your interest.

Signed Donald Berment, Secretary.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

G.M. Co-ordinators : David Law, Johnny Bharath.

P.O.R.O.

CARIBBEAN NEW MEDIA GROUP LIMITED

11A, Maraval Road, P.O. Box 665, Port of Spain

Tel: (868) 622- 4141, Fax: (868) 628-2043

February 15, 2007

Attention: Jesse May Ventour

As per our telephone conversation, earlier today, please find the attached sponsorship package for review.

If any prospective advertiser wishes to purchase airtime only, we can provide them with a spot rate of \$100.00 plus Vat per 30sec ad.

Sponsorship Package

Investment: \$5,000.00 per month
Entitlement: 50 x 30 sec commercial
Opening and Closing Credit
Associated Promos

Special Notes:

Price quoted is subject to 15% Vat

Price is based on 30sec material

Package cannot be used as part of any other offer from CNMG

For further assistance, I can be contacted on 622-4142 ext 4075 or 689-4209.

Regards,

Patricia Johnson
Direct Sales Executive



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



Hello Folks,

Inside the Male Mind has completed 14-2 hour sessions to date and the response has been extremely encouraging. (IMM Recent Schedule attached). The Ministry of Social Development is interested in sponsoring the Project and one PTA has received the first 12 programmes on the first and second CD's.

A total of 62 persons have already received these two CD's and 16 Organisations have been targeted for sponsorship with the first CD included (today 30/4/07)

Some of the Panelists have received textbooks published by other Panelists and it is our intention to supply all Panelists with copies of published work by other Panelists.

This project has tremendous potential for national development and in my view connects all citizens in a movement to address the underemployment of men and women in the Education system.

Not only are we creating a "valuable media resource" for the present and future generation of school children, we are putting the male voice in the environment where it is lacking and sharing this male space with women in a dignified, respectful and intelligent manner, showing how positive relationships can be achieved once there is mutual respect.

In addition we are on "AIR" every Thursday at 8pm to 10pm, providing our citizenry with the opportunity to participate in "Wholesome Talk" on Talk City Radio 91.1FM.

As soon as money becomes available, the advertising will notify the general public of our history and future plans.

The next step will be the offering of these programme CD's to all learning Institutions in Trinidad and Tobago and all teachers wanting same.

After that, will be the Caribbean and wherever else it is needed.

Dr. Russell Foote has suggested that we transcribe the CD's in Book form and this option will certainly be explored.

Folks, as you are aware, this is National Development, so that no charges will be made for the distribution of the CD's and/or book.

What we are doing as responsible, mature citizens of Trinidad and Tobago, is contributing to the solution, which will create a peaceful Nation.

So far we are going full speed ahead and with the grace of God, nothing will stop us.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



Hello Samora and Peter,

(Response to Email from Jamaica, 2/May/2007)

I posted the 2 CD's compiled so far with 6-2 hour sessions on each one, today at 5pm. It may take a week to reach Peter in Jamaica.

The programme is aired every Thursday at 8pm on Radio 91.1FM Talk City Station and finishes at 10pm. The host Journalist and part founder of the programme is Ms. Jessie May Ventour. The other founders are listed on the Schedule enclosed in the letter to Peter and we have completed 14 Sessions to date. The next is Thur/3/May/07 at 8pm, "Men and Sport".

As regards its History, a number of men in Trinidad and Tobago have been expressing the need for a space to reach out to men in society and engage them in wholesome discussion.

A number of men have also been very active in reaching out to men in society, especially those men experiencing violence in their lives and the lives of their loved ones.

Some of these men have also been writing and publishing material, which in part identifies their concern and focuses on specific issues, e.g. Dr. Russell Foote, Dr. Robert Moultrie, Dr. Kenneth Niles.

It is within this context, realizing the tremendous potential of the human male to make the best use of the God given talents, gifted to the male, that the programme was conceptualized.

And when you consider that the name was a joint contribution by a man, Brian Bradshaw and a woman Jessie May Ventour, we have the basis for developing true equality with equity. Jessie suggested, "Inside the Male Mind" and Brian suggested, "women can't hear what men do'h say".

Thank you both for your interest and we welcome the opportunity to be part of The MAN Initiative website. You have our permission and blessings to share as much as you can from the CD's. Please bear in mind however, that there are three conditions to be satisfied, if copyright is not to be infringed: -

1. The source from where the material originated must be identified (91.1 FM of the CNMG Group in T&T)
2. The material must be used for the purpose it was intended, in this case education.
3. There must be no monetary gain in the use of the material.

In addition, you could inform the Manager of the Radio Station, Mrs. Gail Seegobin of your interest in the Programme, 868-622-4911. I am sure the link with The MAN Initiative will be most welcome.

The philosophical underpinning of this outreach effort by a Men's Organisation, Concerned Men and Women of our Nation and a Corporate Body, is couched in a belief system which acknowledges the innate goodness of the human being and seeks to withdraw, embrace and share the benefits of such goodness in a manner and location, where it will produce the most successful outcomes.

Donald D. Berment,
Knowledge Is Power
Sharing It Is Love.

On 5/2/07, Samora Bain <samora.bain@gmail.com> wrote:

Hi Mr. Berment, my name is Samora Bain and I'm responsible for updating the MAN Initiative website. I got some information about the programme but I need to know when it is aired and a little about the history of the project so that I can post it. I also proposed to Peter that we could explore making the entire programme or snippets of it available for download and/or streaming. Samora.-- Samora A. Bain, MS

"Blessed is she who has believed that what the Lord has said to her will be accomplished." Luke 1:45

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com **Web Site:** <http://www.mavaw.com>



E-mail sent by me on Wednesday 1st August, 2007 to MAVAW members.

Hello Folks,

The first DVD compiled by us contains our past CD's and 27, 2-hour sessions of the Radio Programmes we have done with 91.1 Talk City of the CNMG Group, titled *"Inside the Male Mind--women can't hear what men do'h say"*. I am going to send a DVD for each of you to listen to and give an opinion in writing of its potential use. The University of the West Indies placed the CD versions, in the West Indiana Sections, here in Trinidad and in Barbados and Jamaica. The Centre for Gender and Development is also making use of the CD's they have been given. The Behavioural Sciences Department is going to use the CD's in their Training Programmes. A couple of local schools have the CD's for sharing to selected student groups. The Heritage Section of our National Library Services has a DVD for patron use. I have started using the DVD in my Counselling Sessions and the first use was very promising. A couple was referred to MAVAW for counselling by a Magistrate in Arima before she made a decision to vary a protection order. The couple had Counselling, read Dr. Moultrie's book and listened to selected talk programmes. The order was varied on Thur/2/08/07. Sunday gone I visited our Youth Training Center in Arouca and the Superintendent Mr. Sterling Stewart will be given a DVD for analysis, with the hope that it can provide some guidance for those 100 plus young males housed there.

The long term vision for this DVD is to have it used in learning institutions, in youth training centers, in prisons, in NGO training and group therapy sessions, here and internationally, eventually having it in every home as a parenting tool. Some of our top academics and experienced adult males and a few females participated so far and the content is very relevant, according to the psychiatrists at St. Ann's Mental Hospital.

When funds become available, all the programmes will be transcribed and the DVD and the text versions will be distributed as far and wide as is humanly possible. The cost to transcribe six (6) 2-hour programmes is \$TT 1, 200.00.

Your opinions will be used to get the State to fund the completion of this project. Hopefully in this election year, they will pay for the Radio time, the books for Guests, the DVD's and CD's, the stationery and printer's ink. The collection of MP3's, compilation of DVD's, office, "go for" and computer time will remain a cost absorbed in the interest of national development.

Six MAVAW members just completed 2 days of intense training by two Yale University Professors on the subject of "Crime as Trauma". The Ministry of Social Development has decided to fund the balance of the training cost for this. Some documents are appended to this email.

Yours In Nation Building

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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



What Is The BSD Syndrome?

The **BSD Syndrome** is a local Trinidad and Tobago analytical concept for Domestic and other Violence, being developed by the NGO, "**Men Against Violence Against Women (MAVAW)**." (1994).

This concept utilizes the information, research and expertise already available for people working in the area of Violence Reduction, placing all that is presently being made use off, under the phenomenon of a **Syndrome**, identifying **BSD's** in a number of ways, briefly explained below.

Tons of work has already been done on: -

- **Belief System Deficits, (BSD)**
- **Behaviour Skill Deficits, (BSD)**
- **Biological System Deficits (BSD) and**
- **Baggage System Dependencies (BSD)** by practicing

Psychologists, Psychiatrists, Sociologists, Social Workers, Medical Internists, Building Biologists, Nutritionists, Interior Designers and Housing Specialists/Community Planners.

Unfortunately, rarely do more than one or two of these professionals; focus on the problem of Domestic Violence and/or Societal Violence, at any one point in time or in any single piece of literature, primarily because of academic learning structures and egotistical practices.

What the **BSD Syndrome** will do, is to pool all the relevant data together under a **Syndrome** and spread the gospel of a Holistic approach to solving Violence Problems. In the **BSD Syndrome**, you will realize that violence in relationships is a paradoxical issue. Characteristics identified as BSD's in "**abusive outwards behaviour**", is complemented and also considered "**abusive acceptance behaviour**", recording the paradoxical fact that both parties in a relationship have BSD's.

It is therefore, a philosophical and scientific way to moves from the individual discipline solutions to a multi-discipline solution and depends on the acceptance of the **concept** that no one discipline has the answer for a situation where recurring violent behaviour have a variety of influencing elements.

Consequently, a model of the four (4) main characteristics within the **syndrome** can be used for research, analysis and diagnostic purposes. In addition, programmes for development in the four areas identified above, can be designed to replace the existing unsuitable ones, which in the main, contribute to polarizing the sexes, using inflammatory language, limiting the healing process.

A lot of research has already been collected for editing, prior to the preparation of a multi-authored text titled "**Roots of Societal Violence—Understanding the BSD Syndrome**". A few professionals have already been approached to be part of this ambitious project and in due course, some of the challenging logistics will be hammered into place. The days of using "Batterer", "Victim", "Perpetrators" in violence analysis, are numbered in the minority.

A letter to the Webmaster of the most powerful "male issues" website, Bert Hoff is appended to this explanation for further clarification and description of our work as **MAVAW**.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.

To: berthoff@comcast.net.

REPLY TO BERT HOFF

Date: Wed/15/Oct/03

From: mavawsec@yahoo.com

Hello Bert,

Please accept my sincere thank you, for your quick response and frank comments to/on my Email "Men Against Violence Against Women". Let me also acknowledge here my deep appreciation for your work in maintaining "Men Web" and David Troops' efforts in The Men's' Issues opus. These resources will forever be a tremendous help to all men working on issues which affect men, be it abuse to them, from them, to and from their loved ones and to the environment. Another site to note is www.menagainstviolence.com. The other Email to you, mentioned November 19th, the annual celebration, locally and in the Caribbean of "International Men's Day". My wish is that you hold no objection to this celebration and spread the word to the best of your ability.

The philosophy underpinning reduction and elimination of unacceptable violence, in my view, must accept different methodologies, presentation styles and degrees of healing by the persons involved; all based on their personal levels of emotional, physical and spiritual maturity.

Many men, on first hearing about MAVAW and reading our documents, get the impression that we do not realize the full extent of abuse to men or support them to the same degree, as we do women. A closer perusal of our Formal Documents and our History will show quite the opposite.

For the past five years MAVAW (Men Against Violence Against Women) has been operating a 24-hour HOTLINE 1-868-637-0924 with mailbox and cell phone 1-868-753-0804, so that we can testify to the pain and suffering of both men and women experiencing violence in their relationships. Our members sat on the Cabinet appointed Committee, which reviewed our Domestic Violence Legislation. MAVAW men now sit on the Cabinet appointed Committee, which is analyzing the Status of the Family in Trinidad and Tobago. Our Crime Statistics predominantly record offences by violent young males, a serious concern to us as men, fathers, uncles, brothers, nephews, grandfathers and adults. At last count, 5,494 men were incarcerated in our Prison system and 216 women. A fact we aggressively requested to be noted by the formulators of the first National Gender Policy. As our Documents state "We Want Change Not Exchange"

Every Judge, Master of the High Court, Justice of the Peace, Magistrate, Library, Parliamentarian, Calypsonian, Media House and many NGO's to name a few have a copy of our 2002 Domestic Violence Awareness Handbook. On every occasion possible and there is a very interactive media component here; we challenge men and women on their gender insensitive statements. MAVAW coordinated a 13-week radio programme titled "Talking Gender" emphasizing how both men and women are affected equally by violence in relationships.

At present there are five very important projects, which are getting the support of Men Against Violence Against Women: -

1. Publication of a textbook by member Dr. Russell Foote, "Roots Of Youth Aggression: Home, School and Multilevel Interventions",
2. International Men's Day by friend and supporter of MAVAW PhD candidate Jerome Teelucksingh.
3. "Men's TV" a one hour television programme for men, hosted by member Dr. Robert Moultrie, with half hour interviews and half hour public interaction.
4. The BSD Syndrome Concept, our most important and "people issue" to date (explained below in part, which in my view is the future of Domestic Violence analysis and discussion).
5. A Bumper Sticker Programme, utilizing our most poignant "One Liners.

This **Syndrome** will eliminate the terms now used in the **Violence In Relationships Arena**, terms like **victim, batterer, perpetrator, domestic violence** etc. Within the **BSD Syndrome**, you will understand that Violence In Relationships is a paradoxical issue...Characteristics, which have already been well documented elsewhere, now come together under the umbrella of a Syndrome, and paradoxically, what is considered abusive as “outwards behaviour” is complemented and also considered abusive as “acceptance behaviour”, recording the fact that both parties in the relationship have BSD’s. These Characteristics can be explained under 4 Heads, which time and space allows for brief mention here: -

1. Belief System Deficit (BSD)
2. Behaviour Skill Deficit (BSD)
3. Baggage System Dependency (BSD)
4. Biological System Deficit (BSD) and these are the negative components in the Syndrome. The positive action within the Syndrome also termed BSD’s, but refer to methodologies utilized to accomplish Development: -
5. Belief System Development.
6. Behaviour Skill Development
7. Baggage System Development and
8. Biological System Development.

This concept scientifically places the Violence In Relationships Issue, into a medium that takes away the stigma and gender polarizing associated with its treatment in the past. We anticipate resistance to this concept by some women, primarily because every statistic, which lists one person being hurt, will also have to list the other person causing the pain, as being hurt too. A lot of women will find that hard to accept, but we hope that in few years time this will change.

In the past MAVAW actively co-hosted Male Awareness Week in December, Fathers’ Week in June and fully support the entire Women’s Days here. In Canada during the year 2000, we were actively involved with planning the first Dad Walk by the White Ribbon Campaign. This year they celebrated their 4th Dad Walk on the 15th June at the Toronto Zoo. <http://www.whiteribbon.com>. We were also instrumental in changing one Canadian Government programme from “Male Batterers Programme” to “Spousal Abuse Programme”. In Suriname during November 2002, one of the feminist’s organisations there, which has progressed to the “people issue” stage, Foundation Stop Violence Against Women, Director Tienke Sumter, Email stopgeweld@sr.net, invited us to participate in a 3-day conference and provide a 4-day training programme for their NGO Sector in the following areas: -

- | | |
|---------------------------------|---|
| 1. Domestic Violence Awareness. | 2. Parenting |
| 3. Healthy Relationships. | 4. Domestic Violence and Interior Design. |

The conference Theme was **“Development= Change: From Women Counseling To System Oriented Counseling”** and my presentation was titled “The Role Of Men Against Violence Against Women”. Let me acknowledge that it was at a training session with the top managers of this forward looking feminist group that the BSD Syndrome was fine-tuned with their contribution, from just noting the “baggage” as a characteristic to the” Baggage System Dependency”.

What we firmly believe however is that we as men must take responsibility for male violence and do all in our power to reduce and eventually eliminate it from our society (**Violence by men against men, women, children and the environment**). If women choose to do or not do the same, they will bear the consequences of their action. We are men not God, so judgment is not ours to pass

Please keep in touch Bert and forgive this long Email.
Donald Berment, Secretary MAVAW



Research History Of
M.A.V.A.W.
From
February 1994
To
July 2001

INTRODUCTION

Men Against Violence Against Women (MAVAW), could be considered to have had a Natural Birth, in that it was a man's idea, put forward and accepted at a forum to deal with rising crime in 1994, hosted by a Feminist Organisation, called The National Women's Caucus (NWC). Said idea was to have a Crime Committee made up of concerned men in society, focussing on violent male behaviour and developing strategies to reduce and eventually stop this male behaviour.

After functioning for about nine months within The National Women's Caucus, the Crime Committee developed into the organisation "Men Against Violence Against Women" and thereafter, MAVAW became an active participant in the "Men's Movement", joining the fifty (50) year old International Men's Movement and the budding Caribbean Movement, which was started in Jamaica in 1991, with the Fathers' Incorporated Organisation.

MAVAW is a Proactive way to take responsibility for Male Violence and to contribute towards the creation of a Violent Free Society, i.e.,:--

1. It puts Concerned men to Work and to identify with Problem Solving.
2. It allows men trying to Change, to achieve Success, by Working to help others.
3. It tries to reach men in Denial, who still live in Violent Relationships, by offering them Support and a way out.

MAVAWISM therefore, is the Pursuit of Equal Rights with Consequent Appreciation for the Differences between the Sexes, Utilising the Principle of Equity and with an Accent on Bringing Paternal Care back into the Home wherever it is Lacking.

MAVAW's MISSION is to reduce in the first instance and eventually eradicate unacceptable violence in society, with an emphasis on Domestic Violence and Violence Against Women, using a multi-disciplinary approach, focussing on correcting behaviour skill and belief system deficits.

MAVAW REGISTERED as a Non-Profit Company (M 1799 95) in August of 1998 and has three (3) First Directors, namely: -

- | | | |
|-----------------------|--------------------|------------|
| 1. CHRISTOPHER HOLDER | POLICE OFFICER | CHAIRMAN. |
| 2. DONALD BERMENT | HOUSING SPECIALIST | SECRETARY. |
| 3. DESMOND PERSAD | ACCOUNTANT | TREASURER. |

Fiscal Year—1st July—to—30th June.

Over the period February 1994 to date—July 1999, MAVAW has recorded 381 Outreach Activities/Efforts, spanning the full spectrum of Social Activism, the most high profile are: --

1. Campaign to have our Annual Male Awareness Week in December and our Annual Fathers' Week in June, declared International Events on the United Nations Calendar.
2. Promotion of an Annual Gender Sensitive Calypso Competition, in order to make full use of our major Cultural Entertainment Season, in our Quest for a Violent Free Society.
3. Campaign to build the First Transitional Home For Men In Change Mode.

Activities year by year are listed on the following pages.

(Page 2 of 5)

THE YEAR—1994.

1. Presentation of “THE RIPPLE EFFECT THEORY” (RET) on Crime at the Chamber of Commerce “National Consultation On Crime”, held in the Queens’ Hall.
2. Attended a ten (10) day Training Course, hosted by the Ministry of Social Development, on the Topic, “Preparing NGO’s to Assist in the Social Service Delivery System”.
3. Sat on a Committee to support Senator Diana Mahabir Wyatt’s Presentation to the Senate on The Unremunerated Work Bill.

THE YEAR—1995.

1. Presentation of a “3—Line Paper On Domestic Violence”, in Room 101, UWI’s Engineering Building, said paper promoting the Concept of Full Cycle Human Resource Management.
2. Attendance at Rallies, Processions, Seminars and Exhibitions, disseminating literature aimed at correcting Behaviour Skill and Belief System Deficits.
3. Holistic support to then Member of Parliament, Hulsie Bhaggan, for one year, because she was alleging that Psychological Violence was being done to her.

THE YEAR 1996.

1. Attendance at Rallies, Processions etc., was also done in Year 1994 and continued thereafter.
2. Review and Recommendations submitted to the Ministry of Housing and Settlements, on our Country’s Report, to the Habitat II Conference in Istanbul, Turkey.
3. Presentation titled “Female Genital Mutilation (FGM): Maximum Male Oppression And Horrific Girl Children Abuse”, for International Day Against Violence To Women.
4. Presentation titled “Domestic Violence And The Men’s Movement”, to a Lunchtime Seminar, at the Centre For Gender and Development studies, on the St. Augustine Campus of the University of the West Indies.
5. Initiation of the First “Male Awareness Week” in December, in collaboration with the then Ministry of Community Development, Culture and Women Affairs.

THE YEAR 1997.

1. Sat on a Cabinet Appointed Ad Hoc Committee, to review the 1991 Domestic Violence Act and make Recommendations to correct the problems experienced by persons using said Act.
2. Attended a 3-Day Conference in Barbados, on the Topic “Gender—Families and Sexual Health : A Spotlight On Males”, hosted by the International Planned Parenthood Federation.
3. Presentation titled “Masculinity Construction: A Critique and Experiential Perspective”, to a Workshop at Holiday Inn on Domestic Violence With a Focus on Male Perpetrators.
4. First ever “Fathers Week Celebrations” held in June, with co-host Power 102 Fm Radio.
5. Participant in UNIFEM, Latin America and Caribbean Section—1 Year Campaign Against Violence Against women, from November 25th 1997 to December 10th 1998.

Activities continues on the next page.

(Page 3 of 5)

T H E Y E A R 1 9 9 8.

1. Attended World Bank's 2-Day Working Forums on Youth Development, at the Crew's Inn, Chaguaramus.
2. Attended the International Association Of Community Police Officers (IAPCRO's) 27th Annual Training Conference at the Trinidad Hilton "Embracing The Youth Through Community Policing" and delivered a Presentation titled "The Game Of Violence and The Youth Psyche".
3. Presentation titled "Violence In Relationships: Strategies For Prevention", to the Sixth (6) Form students of Tranquillity Government School.
4. Attended a 3-Day Gender Sensitization Workshop at Cascadia Hotel, hosted by the Ministry of Culture and Gender Affairs titled "Training And Sensitization In Gender And Development".
5. Co-hosted with the Centre For Gender and Development Studies Unit at UWI St. Augustine, a Panel Discussion titled "Men And The New Gender Relations", in the ISER Conference Room on Campus, during the 3rd Annual Male Awareness Week.
6. Celebrated the 2nd Annual Fathers Week, with a "Fathers Fiesta Exhibition" on Brian Lara Promenade, co-hosted with the newly formed Fathers Who Care Non governmental Group.

T H E Y E A R 1 9 9 9.

1. Promotion of the first "Gender Sensitive Calypso Competition", in order to introduce a new Challenge to our Local Artist, utilising our major cultural entertainment season.
2. Planning the publication and distribution of a 65 page "Domestic Violence Awareness Handbook", edited by the Chairman of MAVAW, Police Officer Christopher Holder.
3. Attended Rape Crisis Society's 4-Day Induction (Basic Counselling Training Programme), dealing with issues of Sexual and Domestic Abuse.
4. Prepared an Article for a Newsletter of the Women and Development Studies Group, titled "A Man's View Of Violence Against Women".
5. Planning a 1-Year Gender Sensitization Project, with the Women and Development Studies Group at the University of the West Indies, titled "Man To Man : A Training The Trainers Project", which we hope to start in October of 1999 and end in November 2000 and produce a Manual to guide future training, focussing on Reaching The Man Inside.
6. Discussion with Prison Authorities, to address inmates Belief and Behaviour Deficits. All six (6) Institutions are targeted, Carera, Frederick Street Port of Spain, the Youth Training Centre, Maximum Security, Golden Grove Men and Golden Grove Women.
7. Planning with UNESCO Clubs of Trinidad and Tobago, a Project for Forms 1—6 boys, aimed at reducing Violence In schools.
8. Left Trinidad in November of 1999 to go to Canada. During my stay there I completed a 5-Month Developmental Research Project titled "Violence Reduction Strategies In A Large Multicultural, Racially/Tribally Diverse Developed Country—Using the RET Model".

Activities continue on the next page

(Page 4 of 5)

T H E Y E A R 2 0 0 0.

1. Returned from Canada on Wednesday 5th April 2000. On Saturday 8th April I resumed Co-Supervision of “The Man To Man: Training The Trainers Project”, which started in March.
2. Resumed dissemination of information at various fora and intensified radio appearances, which climaxed in a 14-Week—1-Hour Lunchtime Programme, on Radio 104 FM, titled “Talking Gender”. (*Audio tapes of the programmes are available*)
3. Attended National Family Services outreach counselling group sessions, for men and women.
4. Resumed planning with the Prison Authorities and submitted a Healthy Relationships Curriculum, called “Managing Manhood”, to reach inmates incarcerated for sexual offences.
5. Attended a 2-Day Regional Symposium On Juvenile Justice In The Caribbean, titled “Towards A Rights Approach For Children”, at the Crowne Plaza, hosted by the United Nations Children’s Fund (UNICEF).
6. Resumed planning the Non-Violent Project for Forms 1—6 Boys, of the UNESCO Clubs of Trinidad and Tobago.
7. Attended the 2nd International Men’s Day at Palms Club San Fernando on Sunday 19th Nov.
8. Celebrated UN World AIDS Day with a 3-Day Lecture Series for Curepe Junior Secondary School, Forms 1—3.
9. Spent six (6) months in an Urban environment, Eastside Plaza, Charlotte Street, Preparing and Collecting Preliminary Data for the Study titled, “*Examining The Role Of Intimacy And Violence In Spousal Relationships, And Its Impact On Poverty, In An Urban Environment*”. Lack of funds prohibited full development of this Project, which had Three (3) Components.

T H E Y E A R 2 0 0 1.

1. Continued participating in Exhibitions and other forums when invited, disseminating and displaying literature aimed at correcting Belief System and Behaviour Skill Deficits.
2. Prepared Text on Parenting for Desktop Publication, using Ria Rogers guide to Hassle free Parenting.
3. Hosted with the Women and Development Studies Group, the Graduation Ceremony of “The Man To Man: Training The Trainers Project”, in April.

NOTE:

1. Awaiting funding to proceed with some of the Projects outlined above
2. Please use our Website <http://www.mavaw.com>.
3. Please use our Email: mavawsec@yahoo.com.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



Comment on Proposed Gender Policy—Sat/25/Nov/2006.

Hello to all and I wish you a pleasant Christmas Season and New Year to you and your loved ones.

My pleasure to be part of the necessary discourse during the “Gender Audit” conducted by the Commonwealth Secretariat at the Centre for Gender and Development on the UWI Campus, was dimmed somewhat by the hurt Professor Reddock felt, when I did not have my notes to support my challenge to the Gender Policy prepared by the Centre.

However in confirming my tremendous respect for MAVAW’s history with the Centre and Professor’s Reddock commitment towards highlighting the importance of men in the Debate on Gender Issues over the years, I also confessed to not having read the whole Policy.

In my defense, when reviewing policy documents, I first examine the Contents, Executive Summary and in this case “The Guiding Principles” to get an overall picture of its intention and balanced focus and if this is not available my desire for further reading wanes.

The Gender Policy Guiding Principles noted the numerous documents and conventions, which deal specifically with the protection and development of women and we support this wholeheartedly. In the absence of any such convention for the specific concerns of men, maybe mention should have been made of what is available, like the Revaluation Counselling Draft Human Male Policy.

Careful analysis of what is noted in the Principles, highlights the well recorded concerns of women, even the absence of women at “top decision making positions”, which we also strongly support, but sadly, it is minus what is the harsh reality of men, i.e., the urgent and immediate need to address the problems of men in prison, men as homeless persons, men not present in their homes or having the opportunity to be role models for their children, men not present at Primary and Secondary School environments, to add balance to the continuous development of our young men and women, young men dying at alarming rates, young men primarily involved in violent crime and so on and so forth.

If the concerns of women is to have such prominence in the “Guiding Principles” of a Gender Policy, men like me and all men in Trinidad and Tobago, must see their concerns also prominently placed there too. Gender is about men and women together, not women and then we add on men to make it appear gender neutral.

I promised Professor Reddock, to read the whole document and provide her with my comments. This will take a while, since the need to have an income is critical. All the documents referred to in the Policy have to be read and I look forward to the exercise.

However, please believe that I have no intention of discrediting the work of these hard working women, since there are men who deeply regret the neglect for and hurt to our other half, but we cannot ignore our own neglect and hurt. The evidence is too glaring, dangerous and not fully considered. If the achievement of a balanced social change movement has to be successful, the work of our women outside of the home environment must be encouraged alongside the work of our men inside the home environment.

Yours In Nation Building

Company No M 1799(95) Charitable Status No F (BUD):7/4/205

P.O.R.O.

FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.



Men Against Violence Against Women

Email: mavawsec@yahoo.com Web Site: <http://www.mavaw.com>



M.A.V.A.W. Goals

- 1)** Inform MEN about our CONCEPT, which is, that the PRIMARY VIOLENCE being committed Against WOMEN is a PSYCHOLOGICAL One, in that MOST MEN have not Accepted WOMEN as EQUAL, Together with Appreciating Them as DIFFERENT.
- 2)** Provide in the First Instance, for EDUCATION and TRAINING of all our MEMBERS and Well Wishers and in the Second Instance, on Request.
- 3)** Locate, Identify and Register, All MEN in Solidarity with our CAUSE, both in CONCEPT and these GOALS, offering them participation in M.A.V.A.W., which is one of the PROACTIVE ways to take RESPONSIBILITY for MALE VIOLENCE and also which will CONTRIBUTE to CREATING a Violent Free Society.
- 4)** Conduct Research generally and Needs Analysis where possible, on the Incidence and Intensity of VIOLENCE IN RELATIONSHIPS, with an Emphasis on DOMESTIC VIOLENCE dedicating ourselves to Reducing and eventually Eliminating, Unacceptable Violence in Society, using a Multi-disciplinary approach, focussing on Correcting Behaviour Skill and Belief System Deficits.
- 5)** Initiate and/or Engage in Social Activism, in order to push Existing and Emerging Societal Problems with Violent Content, TOWARDS Gender Sensitive Social and Educational Solutions.
- 6)** Develop and Maintain, a NETWORK of Committed and Qualified Members and Friends, in order to Provide Both MEN and WOMEN, with Short Term and Long Term Assistance, Physically, Emotionally and Financially.
- 7)** Affiliate With and/or Work alongside, all other Non-Governmental Groups/Organisations, Civil Society and Governments, who share with us, this Common Goal of Reducing and Eventually Eliminating VIOLENT BEHAVIOUR, In and From our Society.
- 8)** Host when Possible and Attend when Invited, Public Meetings, Seminars, Symposiums, Workshops, Consultations, Conferences etc., both Locally and Internationally.

Yours In Nation Building

P.O.R.O.

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FIRST GENERAL MANAGEMENT COORDINATORS—DONALD BERMENT—DAVID LAW—JOHNNY BHARATH.
FIRST DIRECTORS—CHAIRMAN—CHRISTOPHER HOLDER—SECRETARY—DONALD BERMENT—TREASURER—DESMOND PERSAD.

LET US BUILD A PEACEFUL SOCIETY

By David Law.

WHEN MEN AND WOMEN DO NOT UNDERSTAND THE POWER OF THE EQUATION
SUBTRACTION WILL ALWAYS BE A DISTRACTION
SUPERIORITY MORE OFTEN THAN NOT BREEDS INSECURITY
PLEASE LET US BUILD A PEACEFUL SOCIETY.

WHEN FAMILY VALUES ARE NOW AN ENDANGERED SPECIES
DOMESTIC VIOLENCE STATISTICS JUST A SERIES IN AN EVOLVING MORASS
FORGET THE RACE, JUMP OUT OF YOUR CLASS
LET US BUILD A PEACEFUL SOCIETY.

WHEN SOME OF OUR CHILDREN ARE HOLDING THIS NATION TO RANSOM
CRIME DRUGS VIOLENCE JUVENILE DELINQUENCY MAY NOT GO AWAY EASILY
BLAME IT ON PARENTAL FAILURES, POLITICAL MISERIES
STILL LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR WOMENFOLK ARE TOKENLY HONOURED AND APPRECIATED
GENDER IMBALANCES ARE IMPREGNATED IN OUR CULTURAL PSYCHE
DISMANTLE ALL BARRIERS, ADOPT AN ALL INCLUSIVE PHILOSOPHY
SO WE CAN BUILD A PEACEFUL SOCIETY.

WHEN POVERTY KNOWS NO REGION OR RACE
IT'S TIME FOR US TO SHARE A HUMANE SPACE
BUILD ON SOCIAL CAPITAL, PROMOTE ECONOMIC STABILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN OUR HOMES HAVE BEEN RIPPED APART BY MORAL AND SPIRITUAL DECAY
AND THE ONUS IS ON OUR WOMENFOLK TO KEEP THINGS AT BAY
PRAY FOR OUR MOTHERS, OUR SISTERS TO COPE
THEIR ONLY AMMUNITION, FAITH AND HOPE
WE MUST BUILD A PEACEFUL SOCIETY.

WHEN MEN ABSCOND, TRUE FATHER FIGURES STILL TO BE FOUND
SINGLE PARENTING BECOMES AN ADVERSARY
THE SILENT RAGE OF A GENERATION, IS MORE THAN A TRAGEDY
MEN LET US BUILD A PEACEFUL SOCIETY.

WHEN POLITICIANS PONTIFICATE AND LEGISLATE ON SOCIAL VALUES
PROVIDING ONLY SHORT TERM ECONOMIC CLUES
THE ROAD TO SOCIAL STABILITY IS LONGER THAN FINANCIAL PRUDENCY
LET US BUILD A PEACEFUL SOCIETY.

WHEN HOUSEWIVES ARE NOT ACCEPTED AS HOME MANAGERS
A PERFECT HOME WILL ALWAYS BE A MYTH
GREATER INCOME BUT NO POWER SHARING
IS NOT THE STRUCTURE FOR SOCIAL FAMILY PLANNING
AVOID THE TENSIONS, DO A FEASIBILITY
LET US BUILD A PEACEFUL SOCIETY.

WHEN WE AS A PEOPLE BECOME VOID OF RACE, CLASS, COLOUR
AND UNITE WITH ONE VIGOUR
TO ERADICATE THE SCOURGES THAT LIMIT OUR POWER
BUILDING A PEACEFUL SOCIETY
WILL NO LONGER BE A DREAM, BUT A PRACTICAL REALITY
PEACE, LET US SHARE THE PROCESS.

Composed by David Law, one of the Management Coordinators of MEN AGAINST VIOLENCE AGAINST WOMEN (MAVAW) for the
celebration of International Women's Day 2002 and read by him for the first time at 2.45pm, Friday 8th March 2002 on the Brian Lara
Promenade, Independence Square, Port of Spain.

(This was the seventh (7th) contribution to this Day by Men Against Violence Against Women.)



**ABUSE IS
A CHOICE
NOT A RESULT!**

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



**ABUSE IS THE
INVISIBLE
BOOMERANG**

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



**LOVE
SHOULD BE
BEAUTY-FULL**

**NOT
ABUSE-FULL**

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



**LOVE &
LICKS**

Don't Mix!

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



Gender Equality with Equity

email: mavawsec@yahoo.com



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The BSD Syndrome Domestic Voilence 2020

email: mavawsec@yahoo.com

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Maleness is a Gift from God Manhood is for Humankind Good

email: mavawsec@yahoo.com



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**Femaleness is a Gift
from God
Womanhood
is for Human Good**



email: mavawsee@yahoo.com

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



**HIV
is not
for Me !**



email: mavawsee@yahoo.com

Courtesy ICHRIS INDUSTRIES LTD. Helping to make the difference. !



**Fatherhood is a Gift
from God
Womanhood
is for Human Good**



email: mavawsee@yahoo.com

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**Use your Anger
to Grow not
to Destroy**



email: mavawsee@yahoo.com

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User Registration Small and Medium Enterprises Form 2006

Website <http://www.smeXchange.com>

User Name	donalddbberment
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Enter Your Registration Information

Full Name	☒ Mr. First and Middle Names: Surname:
	☐ Donald Donat Berment
Job Position	Business Owner/Sole Proprietor
Email Address (business)	victorberment@yahoo.com .
Company Name	Donald D. Berment, Housing Specialist/NGA.
Parent Company	N/A
Phone No	1 (868) 637-0924
Mobile Phone	1(868) 383-6184
Fax No	1 (868) 637-0924
Street Address	No 45 River Estate Circular
Street Address 2	River Estate
City	Diego Martin
State.	Trinidad and Tobago
Constituency	Diego Martin East
Geographic	West Indies in the Caribbean Sea Region
Website (Social Work)	http://www.mavaw.com- Email: mavawsec@yahoo.com

Short narrative on the nature of your business



Having acquired training/experience in Architecture, Law, Home and Business Management and Social Psychology, a service as a Housing Specialist is offered which utilises all the training/experience (Formal and Informal) obtained over the last thirty years alongside promoting the concept of Natural Growth Architecture (NGA)

This has been consolidated with a long term research project titled “The Social Effects of and Construction Methods Employed in Community Lifestyles and Low Cost Housing, Relevant to Modern Day Techniques, With an Accent on Tropical Architecture”. This Study utilised the RET (Ripple Effect Theory) and REM (Ripple Effect Model).

Long narrative on the nature of your business

I Studied Architecture with the International Correspondence Schools and stopped short of Final Exams when I realised that Programs in Architecture did not prepare Architects to fully understand the Psycho-dynamics of Space Use, i.e. how space affects human behavior and the factor of a dominant partner during the first client interview *I then decided to pursue a lifelong study of Architecture.*

Further, the aspect of Planned and Unplanned Development and its intimately connected relationship was also unavailable for Classroom Study, demanding an intense experiential thrust, from the community transport factor (pulling bull) to dysfunctional relationships (domestic violence and the use of the judicial process to achieve solutions) and the full consideration of nature in designs.

In addition, the unplanned development in Planned Developments of Small and Medium Enterprise undertakings demanded a strong focus on local Business Management Training in order to satisfy the smooth, efficient operations of Housing Communities.

As a consequence, knowledge was acquired on how to Register Individual Businesses and Companies, handle Income Tax bookkeeping for final submission to a qualified Accountant, prepare VAT Accounts and relate to personnel/staff concerns with National Insurance Benefits, Individual Income Tax Preparations and Peer Counselling with employee to employee and other relationships.

My 8 years practicing Law as a Litigant in our local Courts, up to Court of Appeal level, successfully, allows me to provide a para-legal service to clients requiring liquor licences and to do the relevant research on legal problems to satisfy the preparation by a qualified Attorney at-Law for civil and criminal action in the Judicial system.

Products/Services Offered



Design and Construction of your residence. Business Management as it relates to the duties to The Companies Registry, The Inland Revenue Department, The National Insurance Board, The Magistrates Court in Liquor Licensing Matters, The VAT Administration and the personnel records for final presentation to the Accountant to prepare Final Statements and Income Tax Statements. Research of legal problems to satisfy the presentation by an Attorney at-Law in the Judicial system. All such services provided under a Special Agency contract.

Business Type
Buyer or Supplier

Agent
Supplier

Business Categories

☐ Consultancy & Related Services

☐ Engineering & Construction

Geographic Markets

North America ☐ Caricom ☐
☐ Worldwide ☐

Current Customers

Giulianos Limited, Food Fax Supermarket, Daniels Grocery, Welcome Inn Mini Mart, Emiliana Company Limited, Alec Food Mart, D-Edge Restaurant, PC Supermarket, Savers Choice Supermarket, Wang Li Supermarket, Kong's Café, Charlotte Street Mini Mart, MAAK's Trading, FLOS Caribbean Limited, Michelle's Sewing Shop, EXCEL Holdings, Lai King Restaurant, 'Ha Ha' Chinese Restaurant.

Brand Names Offered

Custom Designed Forms etc. for Customers.

Principal Place of Business

No 45 River Estate Circular, River Estate, Diego Martin

Year Established

November 30th 2004—No BN 82-270

PAYE No. EO 766-00-1

NIS Employer No. 119399—ID No. 19480522018.

Place Of Incorporation

Trinidad and Tobago, Companies Registry of Legal Affairs.

Corporate Status

Sole Proprietor

Legal Representative/CEO

Donald D. Berment (plan to study Law in 2006)



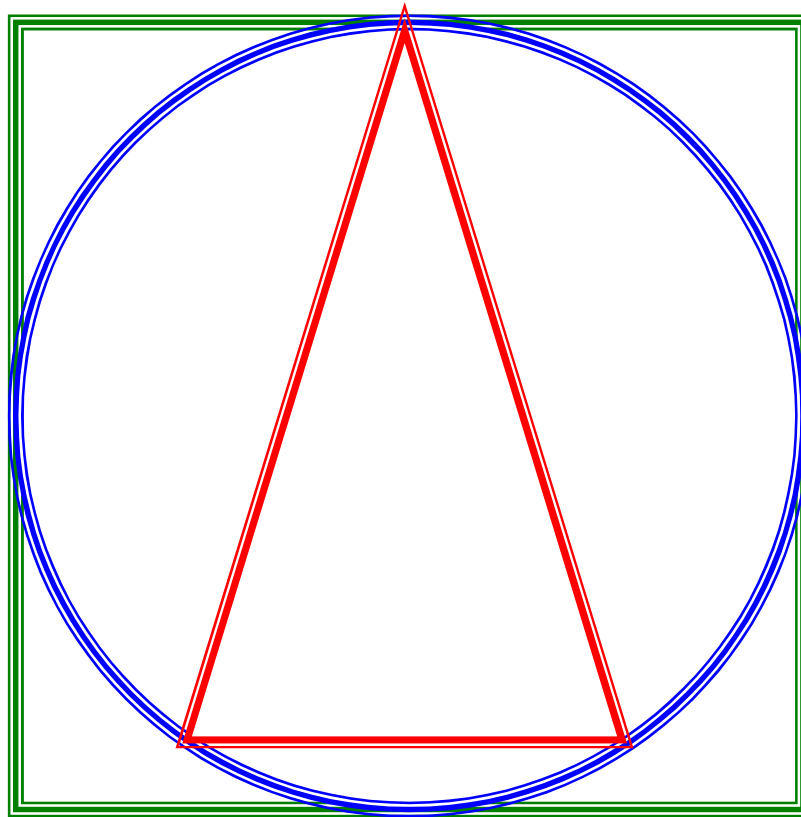
Signed.....Donald D. Berment

M.A.V.A.W.'s Vision



TWENTY-FIRST CENTURY

A Culture Of Peace



YOURS IN NATION BUILDING.